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COUNTY BOROUGH



OF SOUTHPORT

INSTITUTE OF SOCIAL
MEDICINE

10. PARKS ROAD,
OXFORD

REPORT

UPON THE

HEALTH AND SANITARY CONDITIONS

OF THE

COUNTY BOROUGH OF SOUTHPORT

FOR THE YEAR 1950

(including the Forty second Annual Report of the School Medical Officer)

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THE HEALTH COMMITTEE

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(Councillor R. F. FLEETWOOD-HESKETH, T.D., J.P., D.L.)

Chairman : Councillor Mrs. E. SMITH

Vice-Chairman : Councillor W. BERWICK

Ald. H. W. BARBER, J.P.

Coun. E. P. GUTTERY

Ald. Dr. H. COATES, J.P.

Coun. G. W. KENDALL

Ald. Dr. A. W. LIMONT, J.P.

Coun. W. PAULDEN

Ald. F. W. REDDAWAY, J.P.

Coun. L. F. SPENCE

Coun. A. H. ALLEN

Coun. F. E. THORNLEY

Coun. Mrs. J. F. T. BROOKS

Coun. G. B. WOOLFENDEN

Coun. G. H. F. GALLIE

Dr. P. Y. LYLE, M.C.

SUB COMMITTEES APPOINTED 26th MAY, 1950

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Vice-Chairman	Coun. G. H. GALLIE
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Coun. A. H. ALLEN	

Dr. P. Y. LYLE, M.C.

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Ald. F. W. REDDAWAY, J.P.	Coun. L. F. SPENCE
Coun. Mrs. J. F. T. BROOKS	Coun. F. E. THORNLEY
Coun. G. H. GALLIE	Coun. G. B. WOOLFENDEN

Joint Health and Education

The Worshipful the Mayor
(Councillor R. F. FLEETWOOD-HESKETH, T.D., J.P., D.L.)

Chairman	Ald. F. W. REDDAWAY, J.P.
Vice-Chairman	Coun. W. PAULDEN

Home Nursing Joint Sub-Committee

Chairman	Coun. Mrs. J. F. T. BROOKS
Vice-Chairman	Coun. G. H. GALLIE
Ald. F. W. REDDAWAY, J.P.	

National Assistance Act 1948

(Section 47 Cases)

Chairman	
Vice-Chairman	Coun. Mrs. J. F. T. BROOKS

STAFF OF THE HEALTH DEPARTMENT ON THE

31st DECEMBER, 1950

Medical Staff (Full-Time)—

Medical Officer of Health
and School Medical Officer

W. E. FitzGerald, M.C., M.B.,
Ch.B., D.P.H., Barrister-at-Law

Deputy Medical Officer of Health
and Deputy School Medical Officer

G. N. M. Wishart, M.R.C.S.,
L.R.C.P., D.P.H.

Assistant Medical Officer of Health
and Assistant School Medical Officer

Anna I. Davison, M.B., Ch.B.

Medical Staff (Part-Time)—

Medical Officer for Mental Health Service

J. N. Matthews, M.R.C.S.,
L.R.C.P., D.P.H.

Visiting Medical Staff—

Ante-Natal and Post-Natal Clinic

N. E. Laurence, F.R.C.S.

Eye Clinic

D. Rankine, M.B., Ch.B.

Ear, Nose and Throat Clinic

R. V. Tracy-Forster, M.B., Ch.B.,
D.L.O.

Skin Clinic

H. Bardsley, M.R.C.S., L.R.C.P.

Dental Staff—

Senior Dentist

J. H. Highton, L.D.S.

Dentist

W. Martland, L.D.S.

Mechanic

(Vacant)

Attendants

Miss H. Rimmer and Mrs. M.
E. Ball

Sanitary Staff—Chief Sanitary Inspector E. Avison (a)(b)(h)(n)(o); Deputy Chief Sanitary Inspector, G. E. Hadley (a)(b); Meat and Food Inspector, D. Wood (a)(b); Food Hygiene Inspector, T. W. Robertshaw (a)(b); District Inspectors, J. Arrowsmith (a), W. Vickers (a)(b)(h); and S. J. Wilde (a)(b); Infectious Diseases Enquiry Officer, W. Rigby; Rodent Operator, J. S. Amery.

Health Visiting and School Nursing Staff—Superintendent Health Visitor and School Nurse, Miss A. F. Probert (c)(d)(e); Health Visitors/School Nurses, Mrs. D. Brown (c)(d)(e); Mrs. W. Watkinson (c)(d)(e); Misses M. E. Brett (c)(d)(e); J. Holliday (c)(f)(e); Mrs. F. P. Capel; Misses M. K. Donaghey (c)(d)(e); K. A. R. Taylor (c)(d)(e); C. Airey (c)(f)(e), D. C. Ashton (c)(f)(e), M. A. Turvey (d)(e), M. Turner (e)(k), A. Cowper (c)(d)(e), N. Dentith (c)(d)(e).

Physiotherapist—(Vacant)

Speech Therapist—(Vacant)

Midwifery Staff—Supervisor of Midwives and Inspector of Nursing Homes, Miss M. McAleavy (d)(e) ; DISTRICT MIDWIVES, Miss S. A. Cryer (d)(e), Mrs. K. B. Harrison (d)(e).

PART-TIME MIDWIVES :—Mrs. E. Shawcroft (d).

Mental Health Staff—Senior Mental Health Visitor and Duly Authorised Officer, J. Sinnot (i) ; *Mental Health Visitors and Duly Authorised Officers, Miss A. L. Bennett (j) and K. Bain (j).

*Also acts as Senior Welfare Officer.

Clerical Staff—Administrative Assistant, F. H. Dix, A.C.I.S. ; Chief Clerk, W. R. Holgate ; Senior Clerks ; Miss M. E. Wells and Miss D. Allen, B.Com. ; Clerks ; R. Rimmer, Misses N. Somech, B. Jones, L. Pearlman, M. Ball, B. Forshaw, M. Roe, B. C. Jones, S. M. Birrell and E. M. Whaite.

Day Nurseries—

King Street	Matron	Mrs. A. Williams (e).
Bedford Park	Matron	Miss A. K. Baxter (e)(d)(l)

Notes re qualifications

- (a) Sanitary Inspectors Certificate.
- (b) Meat and Food Certificate.
- (c) Health Visitors Certificate.
- (d) State Certified Midwife.
- (e) State Registered Nurse.
- (f) Part I Certificate—Central Midwives Board.
- (g) State Registered Fever Nurse.
- (h) Smoke Inspectors Certificate.
- (i) Relieving Officers Certificate.
- (j) Royal Medico-Psychological Association's Certificate.
- (k) Certificate of British Tuberculosis Association
- (l) State Registered Children's Nurse.
- (m) Member of the Chartered Society of Physiotherapy.
- (n) Sanitary Science Certificate.
- (o) Food Hygiene Certificate.

Ambulance Services—

Chief Fire Officer and Ambulance Officer—J. Perkins, Grad. I. Fire E.

Public Analyst J. F. Clark, M.Sc., F.R.I.C.

Pathologist L. Wise, B.Sc., M.B., Ch.B.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH
AND SCHOOL MEDICAL OFFICER

FOR THE YEAR 1950

TO THE CHAIRMAN AND MEMBERS OF THE
HEALTH COMMITTEE

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report for the year 1950.

The Registrar General's estimate of the population for the middle of 1950 was 85,500 as compared with 85,540 in the previous year. The birth rate for the town of 10.41 per 1000 of the population is low and is now comparable with the rates in the second decade of the interwar period. The infantile mortality rate is also low being 27 per 1000 births and this is the lowest rate recorded so far for the town.

The crude death rate for the town was 16.37 per 1000 of the population as compared with the rate of 15.58 being the average for the previous ten years. The rate corrected for age and sex was 12.44 per 1000 of the population. Just over 42 per cent of the deaths which occurred related to persons aged 75 and over. No maternal deaths occurred during the year as a result of child birth.

The principle causes of death are shown in the Section dealing with Vital Statistics and, as may be expected, these are causes which in the main claim their victims from the older age groups.

One outstanding figure is that the infant deaths due to premature birth which was 16 per 1000 live births in the previous year had fallen to 10 in 1950. This it is hoped may be the result not only of the ante-natal work carried out by the obstetric surgeons, but also the care of premature infants after birth by the paediatrician.

The number of still births during the year was the lowest on record.

The report illustrates the value of the work done by the Health Visitors in the homes and at the Welfare Centres and Clinics.

The work of the Sanitary Section has continued and developed. An account of this work includes information regarding Meat and Food inspection, the results of the sampling of food and drugs and the Food Hygiene work. The courses of instruction on Food Hygiene given to those connected with the various trades and to members of the general public which took place during the winter of 1950-51 were very successful. We are indebted to the St. John Ambulance Association for

their help in organising the classes. The classes are conducted under the aegis of the Association but are supported by grants from the Local Authority and are staffed by members of the Health Department.

The School Health Service continued to work smoothly and efficiently throughout the year. In addition to those children who came within the groups prescribed for examination, all the children in the schools are seen and examined by the nurses responsible for the area in which the school is situated. Any children who appear to need further examination, or concerning whom the teaching staff have some anxiety, are then referred for special examination by the School Medical Officer. In 1950, as many as 1253 special examinations were made. This system must give a sense of security to parents and teachers.

I have pleasure in recording my appreciation of the work done by all the members of the staff of the Health and School Medical Departments and my thanks to the Health and Education Committees for their continued support and consideration.

I am,

Yours faithfully,

W. E. FitzGerald,

Medical Officer of Health and School Medical Officer.

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Part I

STATISTICAL MEMORANDA

AND

VITAL STATISTICS

STATISTICAL MEMORANDA

Area of Borough (including Foreshore)	18,333 acres
Area of Borough (excluding Foreshore)	9,426 acres
Population (1931 Census)	78,927
Do. (Estimated by the Registrar-General), middle of 1950.....	85,500
Density of Population	9.071
Number of inhabited houses, 1st April, 1950	24,626
Number of permanent houses erected and completed during 1950	102
Rateable Value, 1st April, 1950	£965,525
Sum represented by a Penny Rate	£3,829
Number of births registered	890
Legitimate	831
Illegitimate	59
Net birth rate (per 1,000 of the population)	10.41
Average birth rate, preceding 10 years	12.67
Number of infant deaths (under one year)	24
Infant Mortality Rate (per 1,000 births)	27
Legitimate (per 1,000 legitimate births)	26
Illegitimate (per 1,000 illegitimate births)	34
Average Infantile Mortality Rate, preceding 10 years	40
Number of deaths registered	1,400
Crude death rate (per 1,000 of the population)	16.37
Average crude death rate, preceding 10 years.....	15.58
Corrected death rate (per 1,000 of the population)	12.44
Number of deaths from tuberculosis (all forms)	20
Tuberculosis death rate (per 1,000 of the population)	0.23
Average tuberculosis death rate (preceding 10 years)	0.43
Number of deaths from Zymotic disease.....	2
Death rate from Zymotic diseases (per 1,000 of the population).....	0.02
Average death rate from Zymotic diseases (preceding 10 years)	0.08
Number of women dying in, or in consequence of, child-birth—	
From Sepsis.....	None
From other causes	None
Average domestic consumption of water per head, per day	28.73 galls.
Total consumption of water per head, per day	37.26 galls.
Rainfall during 1950	36.51 inches
Hours of sunshine during 1950	1,556

VITAL STATISTICS

Population.—The Registrar-General’s Estimate of the population for the middle of 1950 is 85,500. The comparable figure for the middle of 1949 was 85,540.

Birth Rate.—The total number of live births registered in the Borough during 1950 was 890. Of these 472 were males and 418 females. The birth rate for the year was 10.41 per 1,000 of the estimated civilian population. 59 (7%) of the births were illegitimate. The number of still births registered was 17, giving a rate of 0.19 per 1,000 of the civilian population as compared with the rate of 0.26 for England and Wales.

Death Rate.—The number of deaths occurring amongst the residents of the town was 1,400. Of these 622 were in respect of males and 778 females. The crude death rate for the year was 16.37 per 1,000 of the civilian population. 42.14% of the deaths registered were in respect of persons aged 75 years and over.

Principal Causes of Death.—

Heart Disease inc. diseases of the Circulatory System	610
Cancer	216
Cerebral Haemorrhage, etc.....	181
Respiratory Diseases.....	135
Violence, including Suicide	44
Tuberculosis (all forms)	20
Acute and Chronic Nephritis	12
Ulcer of Stomach and duodenum	10

Deaths from Violence.—There were 44 deaths from violence and these were classified as follows :—

Road Accidents	6
Falls	15
Suicide	13
Burns	1
Asphyxia	5
Drowning	2
Poisoning (Chloral Hydrate and Potassium Bromide)	1
Perforation of Oesophagus during Operation	1

Zymotic Death Rate.—

Diphtheria	Nil	Measles	Nil
Scarlet Fever	Nil	Diarrhoea	Nil
Typhoid	Nil	Whooping Cough	2
Total deaths, 2.	Rate per 1,000 of the population, 0.02		

Infantile Mortality Rate.—

Total Deaths	24	Rate per 1,000 births	27
Legitimate	22	do. legitimate births.....	26
Illegitimate	2	do. illegitimate births	34

VITAL STATISTICS

For years 1931 to 1950 inclusive

YEAR	Popul- ation esti- mated to Middle of each year	BIRTHS			TOTAL DEATHS REGISTERED IN DISTRICT		TRANSFERABLE DEATHS **		NET DEATHS BELONGING TO THE DISTRICT			
		Uncor- rected Number	Net		Number x	Rate	of Non- residents regist'd in the District	of Resi- dents Not regist'd in the District	Under 1 yr. of age		At all ages	
			Number	Rate					Number x	Rate per 1,000 Net Births	Number x	Rate
1	2	3	4	5	6	7	8	9	10	11	12	13
1931	77,280	877	824	10.66	1062	13.74	67	185	56	68	1157	14.97
1932	78,770	915	886	11.25	1019	12.94	68	150	40	45	1079	13.70
1933	78,980	805	769	9.51	1128	14.28	73	157	44	57	1189	15.05
1934	79,100	918	860	10.87	998	12.62	61	153	40	46	1070	13.53
1935	79,300	872	808	10.19	1104	13.92	63	143	52	64	1161	14.64
1936	79,280	880	804	10.14	1105	13.94	81	182	41	51	1189	15.00
1937	78,960	914	837	10.60	1143	14.48	63	205	56	67	1266	16.03
1938	78,600	870	802	10.20	1157	14.65	84	159	56	70	1215	15.46
1939	*78,900											
	*81,840	925	752	9.53	1271	15.53	101	168	41	52	1338	16.34
1940	88,550	1147	871	9.84	1385	15.64	115	148	40	43	1418	16.01
1941	95,410	1455	949	9.94	1375	15.53	171	211	65	68	1415	14.83
1942	90,480	1371	1075	11.90	1213	13.41	108	218	41	38	1323	14.62
1943	85,140	1283	1048	12.30	1237	14.53	73	246	49	47	1410	16.60
1944	82,860	1484	1168	14.09	1150	13.88	87	241	52	44	1304	15.74
1945	81,360	1314	1018	12.51	1121	13.73	62	241	29	28	1300	15.98
1946	84,010	1557	1237	14.72	1073	12.77	63	246	40	32	1256	14.95
1947	84,240	1569	1325	15.73	1268	15.52	114	218	55	42	1372	16.29
1948	85,800	1317	1167	13.60	1126	13.12	58	204	41	35	1272	14.82
1949	85,540	1155	986	11.53	1269	14.84	89	164	38	39	1344	15.71
1950	85,500	1020	890	10.41	1339	15.66	90	151	24	27	1400	16.37

* 78,900 for Birth Rate - 81,840 for Death Rate

x In Column 6 are included the whole of the deaths registered during the year as having actually occurred within the district, military deaths excepted.

In Column 12 is entered the number in Column 6, corrected by subtraction of the number in Column 8 and by the addition of the number in Column 9. Deaths in Column 10 are similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

** "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales die in a district other than that in which they resided.

The following Special Cases arise as to Transferable Deaths :—

(1) Persons dying in Institutions for the sick or infirm, such as hospitals and nursing homes have been regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission the death is not transferable.

(2) The deaths of infants born and dying within the year of birth in an Institution to which the mother was admitted for her confinement have been referred to the district of fixed or usual residence of the parent.

(3) Deaths from violence have been referred (a) to the district of residence, under the general rule ; (b) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known : (c) failing this, to the district where the death occurred, if known ; and (d) failing this, to the district where the body was found.

	1911	Census 1921	1931
Total population at all ages	69,643	71,900	78,927
Number of inhabited houses	15,676	16,314	20,388
Average number of persons per house	4.44	4.41	3.87
Area of District in acres (land and inland water)	9,426	9,426	9,426

DEATHS (Table 1)
Causes of, and Ages at, Death for year 1950

CAUSES OF DEATHS	Totals at all ages	AGE DISTRIBUTION																	
		MALES									FEMALES								
		under 1 yr.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & ovr	Totals	under 1 yr.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & ovr	Totals
1. Tuberculosis—Respiratory	15	—	1	—	1	1	2	—	—	5	—	—	—	2	3	5	—	—	10
2. Tuberculosis—Other	5	—	1	—	1	—	1	—	—	3	—	—	1	—	1	—	—	—	2
3. Syphilitic Disease	3	—	—	—	—	—	1	1	1	3	—	—	—	—	—	—	—	—	—
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	2	1	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	1
6. Meningococcal infections	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
7. Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Other infective & parasitic diseases	4	—	1	1	—	—	—	—	—	2	—	—	—	—	—	—	—	2	2
10. Malignant Neoplasm, Stomach ...	47	—	—	—	—	—	8	11	4	23	—	—	—	—	—	7	7	10	24
11. Malignant Neoplasm, lung bronchus	29	—	—	—	—	—	11	10	2	23	—	—	—	—	—	4	1	1	6
12. Malignant Neoplasm, breast	19	—	—	—	—	—	—	—	—	—	—	—	—	—	2	10	5	2	19
13. Malignant Neoplasm, uterus	11	—	—	—	—	—	—	—	—	—	—	—	—	—	1	5	1	4	11
14. Other Malignant and Lymphatic Neoplasms	110	—	—	—	1	4	14	21	15	55	—	—	—	1	3	18	14	19	55
15. Leukaemia, Aleukaemia	2	—	—	—	—	—	1	1	—	2	—	—	—	—	—	—	—	—	—
16. Diabetes.....	10	—	—	—	—	1	1	1	—	3	—	—	—	—	—	—	5	2	7
17. Vascular lesions of Nervous System	181	—	—	—	—	3	15	24	23	65	—	—	—	—	2	15	45	54	116
18. Coronary Disease—Angina.....	199	—	—	—	—	2	47	41	32	122	—	—	—	—	1	15	22	39	77
19. Hypertension with Heart Disease	39	—	—	—	—	—	5	10	5	20	—	—	—	—	—	4	9	6	19
20. Other Heart Disease	335	—	—	—	1	3	9	35	66	114	—	—	—	—	5	14	42	160	221
21. Other Circulatory Disease	37	—	—	—	—	—	2	6	6	14	—	—	—	—	—	2	8	13	23
22. Influenza	15	—	—	—	—	1	1	1	—	3	—	—	—	—	1	3	1	7	12
23. Pneumonia	40	2	1	—	—	1	4	5	3	16	2	1	—	—	—	2	9	10	24
24. Bronchitis	66	1	—	—	—	1	7	7	15	31	—	—	—	—	1	6	13	15	35
25. Other Diseases of Respiratory System	14	—	—	—	—	2	4	2	1	9	—	—	—	—	—	2	1	2	5
26. Ulcer of Stomach and Duodenum	10	—	—	—	—	—	3	3	—	6	—	—	—	—	—	1	1	2	4
27. Gastritis, Enteritis and Diarrhoea	7	—	—	1	—	—	—	1	1	3	—	—	—	—	1	—	1	2	4
28. Nephritis and Nephrosis	12	—	—	—	—	—	3	—	2	5	—	—	—	—	—	3	3	1	7
29. Hyperplasia of Prostate	17	—	—	—	—	—	2	7	8	17	—	—	—	—	—	—	—	—	—
30. Pregnancy, Childbirth, Abortion	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
31. Congenital Malformations	5	1	—	—	—	—	—	—	—	1	1	—	1	1	—	—	—	1	4
32. Other defined and ill-defined Diseases	120	8	—	—	—	5	8	17	15	53	3	—	—	—	3	17	19	25	67
33. Motor Vehicle Accidents.....	6	—	—	—	2	—	1	1	—	4	—	—	1	—	1	—	—	—	2
34. All Other Accidents	25	1	1	—	1	—	4	—	4	11	2	—	—	1	1	—	1	9	14
35. Suicide	13	—	—	—	—	3	3	1	1	8	—	—	—	—	1	3	1	—	5
36. Homicide and Operations of War	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS—(All causes)	1400	14	5	2	7	27	157	206	204	622	10	1	3	6	27	136	209	386	778

DEATHS (Table 2)
Number of Deaths in Various Age Groups for years 1940 to 1950 inclusive

Year	Total No. of Deaths	Under 1		1—5		5—15		15—45		45—65		65—75		75 and over	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1940	1418	40	2.82	12	0.85	12	0.85	100	7.05	330	23.27	421	29.69	503	35.47
1941	1415	65	4.59	23	1.63	17	1.20	109	7.70	370	26.15	388	27.42	443	31.31
1942	1323	41	3.10	9	0.68	19	1.44	94	7.11	323	24.41	400	30.23	437	33.03
1943	1410	49	3.48	10	0.70	6	0.42	106	7.52	348	24.68	383	27.17	508	36.03
1944	1304	52	3.98	13	0.99	7	0.54	60	4.60	306	23.47	397	30.46	469	35.96
1945	1300	29	2.23	6	0.46	12	0.92	78	6.00	270	20.77	383	29.47	522	40.15
1946	1256	40	3.18	5	0.39	6	0.48	67	5.33	286	22.78	338	26.90	514	40.94
1947	1372	55	4.01	6	0.44	4	0.29	71	5.17	315	22.96	366	26.68	555	40.45
1948	1272	41	3.22	4	0.31	2	0.16	54	4.25	302	23.74	422	33.15	447	35.17
1949	1344	38	2.83	6	0.45	1	0.08	60	4.46	289	21.50	419	31.18	531	39.50
1950	1400	24	1.71	6	0.43	5	0.37	67	4.78	293	20.93	415	29.64	590	42.14

DEATHS (Table 3)

Rates per 1000 population and per 1000 births—years 1931 to 1950 inclusive

Year	Popu- lation	Male	Female	Total	Rate per1,000 Popu- lation	Cor- rected for Age and Sex	Under One Year	Rate per 1,000 Births	Legiti- mate	Rate per 1,000 Births	Illegiti- mate	Rate per 1,000 Births	Pulm'ry Tuber- culosis	Rate per 1,000 Popu- lation	Other Forms T.B.	Rate per 1,000 Popu- lation	Zymotic Diseases	Rate per 1,000 Popu- lation
1931	79280	510	647	1157	14.97	12.69	56	68	53	68	3	55	40	0.52	9	0.12	16	0.21
1932	78770	495	584	1079	13.70	11.62	40	45	35	42	5	79	33	0.42	7	0.09	8	0.10
1933	78980	517	672	1189	15.05	12.76	44	57	38	53	6	115	40	0.51	9	0.11	7	0.09
1934	79100	481	589	1070	13.53	11.23	40	46	37	45	3	79	38	0.48	9	0.11	11	0.14
1935	79300	500	661	1161	14.64	12.15	52	64	51	68	1	18	31	0.39	4	0.05	9	0.11
1936	79280	557	632	1189	15.00	12.45	41	51	37	49	4	68	33	0.42	8	0.10	9	0.11
1937	78960	566	700	1266	16.03	13.30	56	67	50	64	6	120	33	0.42	8	0.10	16	0.20
1938	78600	565	650	1215	15.46	12.83	56	70	49	65	7	132	25	0.32	9	0.11	11	0.14
1939	81840	606	732	1338	16.34	13.56	41	52	37	47	4	70	40	0.49	7	0.09	17	0.21
1940	88550	608	810	1418	16.01	12.65	40	43	33	38	7	121	24	0.27	9	0.10	3	0.03
1941	95410	641	774	1415	14.80	11.69	65	68	58	54	7	115	38	0.40	7	0.07	9	0.09
1942	90480	584	739	1323	14.60	12.11	41	38	36	36	5	75	37	0.41	9	0.10	8	0.09
1943	85140	619	791	1410	16.60	13.77	49	47	43	45	6	67	43	0.50	9	0.10	8	0.09
1944	82860	565	739	1304	15.74	13.06	52	44	45	42	7	67	27	0.32	6	0.07	6	0.07
1945	81360	561	739	1300	15.98	12.63	29	28	25	27	4	35	36	0.44	5	0.06	7	0.08
1946	84010	570	686	1256	14.95	11.81	40	32	33	27	7	69	31	0.37	3	0.04	5	0.06
1947	84240	651	721	1372	16.29	12.87	55	42	50	40	5	64	39	0.46	5	0.06	7	0.08
1948	85800	566	706	1272	14.82	11.71	41	35	35	32	6	76	27	0.31	3	0.04	5	0.06
1949	85540	623	721	1344	15.71	12.10	38	39	33	35	*5	102	26	0.30	5	0.06	6	0.07
1950	85500	622	778	1400	16.37	12.44	24	27	22	26	2	34	15	0.17	5	0.06	2	0.02

One of these infants was an unknown child found in a garden; this child may or may not have belonged to Southport. Excluding this death the rate per 1,000 births would be 82.
 *In addition, another of these infants was allocated to Southport in error, and excluding this death also, the rate per 1,000 births for the remaining 3 deaths would be 61.

DEATHS (Table 4)
Infant Mortality — Year 1950

CAUSE OF DEATH	AGE (weeks)					AGE (months)				Total Number of infant deaths
	Under 1 week	1 to 2	2 to 3	3 to 4	Total under 4 weeks	1 to 3	3 to 6	6 to 9	9 to 12	
Accidental Asphyxia	—	—	—	—	—	2	1	—	—	3
Bronchitis	—	—	—	—	—	—	—	—	1	1
Cerebral Abscess	—	—	—	—	—	1	—	—	—	1
Congenital Malformation	1	—	—	—	1	—	1	—	—	2
Congenital Haemolytic Disease	1	—	—	—	1	—	—	—	—	1
Meningoccal Infection	—	—	—	—	—	—	1	—	—	1
Pneumonia	—	—	—	—	—	1	1	1	1	4
Prematurity	5	3	1	—	9	—	—	—	—	9
Whooping Cough	—	—	—	—	—	1	—	—	1	2
TOTALS	7	3	1	—	11	5	4	1	3	24

BIRTHS AND STILLBIRTHS
For years 1931 to 1950 inclusive

Year	Population	Males	Females	Total	Legiti- mate	Illegiti- mate	Rate per 1,000 Popu- lation	Still Births
1931	77280	403	421	824	769	55	10.66	42
1932	78770	450	436	886	823	63	11.25	63
1933	78980	390	379	769	717	52	9.74	24
1934	79100	477	383	860	822	38	10.87	45
1935	79300	426	382	808	754	54	10.19	41
1936	79280	412	392	804	745	59	10.14	34
1937	78960	388	449	837	787	50	10.60	35
1938	78600	402	400	802	749	53	10.20	41
1939	78900	382	370	752	700	52	9.53	28
1940	88550	448	423	871	820	51	9.84	40
1941	95410	494	455	949	892	57	9.94	40
1942	90480	555	520	1075	1008	67	11.88	37
1943	85140	558	490	1048	958	90	12.30	35
1944	82860	590	578	1168	1065	103	14.09	30
1945	81360	536	482	1018	906	112	12.51	40
1946	84010	628	609	1237	1135	102	14.72	31
1947	84240	692	633	1325	1247	78	15.73	26
1948	85800	582	585	1167	1088	79	13.60	28
1949	85540	532	454	986	937	49	11.53	22
1950	85500	472	418	890	831	59	10.41	17

MATERNAL MORTALITY
For years 1931 to 1950 inclusive

Year	No. of Live and Still Births	RATES PER 1,000 LIVE AND STILL BIRTHS					
		Sepsis		Other Causes		Total	
		No.	Rate	No.	Rate	No.	Rate
1931	866	1	1.15	4	4.62	5	5.77
1932	949	1	1.06	6	6.32	7	7.38
1933	793	—	—	3	3.78	3	3.78
1934	905	—	—	3	3.31	3	3.31
1935	849	1	1.18	3	3.53	4	4.71
1936	838	1	1.19	2	2.39	3	3.58
1937	872	2	2.29	2	2.29	4	4.58
1938	843	—	—	—	—	—	—
1939	780	2	2.44	1	1.22	3	3.66
1940	911	—	—	1	1.08	1	1.08
1941	989	1	0.88	2	1.77	3	2.65
1942	1112	1	0.90	2	1.80	3	2.70
1943	1083	—	—	1	0.92	1	0.92
1944	1198	—	—	2	1.67	2	1.67
1945	1058	1	0.95	3	2.83	4	3.78
1946	1268	1	0.79	—	—	1	0.79
1947	1351	—	—	2	1.48	2	1.48
1948	1195	—	—	2	1.67	2	1.67
1949	1008	—	—	2	1.98	2	1.98
1950	907	—	—	—	—	—	—

Part II

GENERAL PROVISION OF HEALTH
SERVICES FOR THE AREA

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Medical Staff.—The whole time medical staff of the Health Department and School Medical Service remained the same as in the previous year. The Medical Officer of the Mental Health Service continued on a half-time basis and the visiting consultants continued to attend the specialist clinics as in the previous year.

The arrangements as regards the specialists' clinics serve to form an effective link with the hospital services which is valuable in ensuring the efficiency and smooth running of the work.

Dr. E. K. Quigley, the Senior Resident Medical Officer at the New Hall Sanatorium continued to be responsible for the district Tuberculosis Service by an arrangement with the Liverpool Regional Hospital Board.

The Deputy Medical Officer of Health continued to act as Clinical Medical Officer to the Infectious Diseases Hospital at New Hall.

This arrangement between the local authority and the Liverpool Regional Hospital Board, is a very happy one, and greatly helps in regard to the admission and discharge of cases of infectious disease.

This is important for with the help of the general practitioners a continuity of supervision and care can be ensured and a greater degree of control effected.

The arrangement also continued whereby the Medical Officer of Health acted as consultant in regard to cases of infectious disease admitted to the New Hall Hospital.

Dr. Christie of Fazackerley Hospital, Liverpool continued to be responsible for cases of infectious disease in the district when a specialist opinion was required by the general practitioners.

Towards the end of the year, the Health Committee gave approval for Dr. Davison, the lady Assistant Medical Officer of Health, to undertake the general medical care of children in all the homes administered by the Children's Committee. At the same time, the local Executive Council and the Central Medical Practices Committee agreed that Dr. Davison's name should be added to the medical practitioners' list to enable her to treat any sick children in these homes. It is obviously desirable that, if possible, one doctor should be responsible for all the medical care and treatment of such children, and in this connection it is believed that the arrangements agreed by the Children's Committee and the Health Committee in regard to Dr. Davison will prove most helpful. A further advantage arising from the appointment of Dr. Davison for this work will be the close liaison which can be maintained between the two departments concerned, particularly in regard to medical matters and the staffing of the Children's Homes.

Medical Examinations.—The following table shows the work done by the medical staff of the department during 1950 in regard to the medical examination of employees for the purpose of the Superannuation, Sickness Pay and Re-Examination Schemes :—

Department	NUMBER OF MEDICAL EXAMINATIONS			
	Super-annuation Scheme	Sickness Pay Scheme	Re-Examinations	TOTAL
Borough Architect	1	—	—	1
Borough Engineer	6	37	11	54
Borough Treasurer	15	5	—	20
Education	56	21	—	77
Health	7	5	—	12
Libraries	5	—	—	5
Police	2	1	—	3
Publicity	3	11	—	14
Parks and Cemeteries	1	7	7	15
Town Clerk's	7	3	—	10
Transport	2	—	5	7
Water Board	—	4	1	5
Weights and Measures	—	—	—	—
Welfare Services	4	—	—	4
Fire Service	—	—	—	—
Lighting	—	5	—	5
Children's	—	—	—	—
Electricity	9	1	—	10
Gas	2	—	—	2
District Nurses	2	—	—	2
Estates.....	—	2	—	2
TOTALS	122	102	24	248

Laboratory Facilities.—The same arrangements as in previous years were continued. Specimens for pathological examination are sent to the laboratory of the Southport Infirmary and samples of food and drugs requiring chemical analysis are sent to the City Analyst of Liverpool, who also acts as the Public Analyst for Southport. The bacteriological examinations of milk, food and water supplies are done by the Liverpool City Bacteriologist by arrangement with the City of Liverpool Authority.

Private Nursing Homes.—During the year one new Nursing Home was registered by the Council with accommodation for four maternity cases. At the end of the year there were 15 nursing homes on the Council's register, the total number of beds provided being as follows :—

Maternity Cases	15 beds
Medical, Surgical and General Cases.....	92 beds
TOTAL	107 beds

During the year the Supervisor of Nursing Homes made 64 visits of inspection and all her reports were satisfactory.

Persons in need of care and attention.—Prior to the 5th July, 1948 arrangements for the removal to suitable premises of persons in need of care and attention were made under Section 92 of the Southport Corporation Act 1930. As from

that date, however, such persons have been dealt with in accordance with Section 47 of the National Assistance Act 1948 which provides that the Order of the Court requiring the removal of a person to suitable premises shall only remain in force for a period of three months. On application being made, however, the Court may renew the Order to enable further care and attention to be provided if this is considered necessary.

No new cases were dealt with under this Section during 1950. The Court, however, renewed an order on four occasions in regard to a man, aged 88 years, who had been removed to the County Hospital at Ormskirk in 1949 due to the fact that he was not able to care for himself. The reports received from the Medical Superintendent of the County Hospital during 1950 showed that this man was still in need of care and attention and he was still in hospital at the end of the year.

Riding Establishments Act, 1939.—The purpose of this Act is to prevent the ill-treatment of horses used in riding establishments and Mr. H. R. Hewetson is the registered Veterinary Surgeon appointed by the local authority to carry out the necessary inspections on their behalf.

During the twelve months period to the 30th September 1950, Mr. Hewetson made 43 visits of inspection to thirteen riding establishments and all the reports on the premises were satisfactory. Two riding establishments ceased to operate during the period mentioned, leaving eleven on the register at the end of the year.

MATERNITY AND CHILD WELFARE

Notification of Births.—During 1950 a total of 1057 births were notified. This figure included 1033 live births and 24 still births, the corresponding figures for 1949 being 1152 live and 26 still births making a total of 1178. The number of births occurring in the Maternity Hospitals in 1950 was 870 as compared with 929 in the previous year.

Ante-Natal Service.—Two ante-natal clinics were held each week throughout 1950 at 44 Hoghton Street for domiciliary cases, one being conducted by Mr. N. E. Laurence, the Obstetrician in charge of the Christiana Hartley Maternity Hospital, and the other by Miss M. McAleavy, the Supervisor of Midwives. In the first instance the mother is seen by Mr. Laurence, and then, in normal circumstances, she makes alternative visits to the Nurses' and Doctors' Clinics at weekly intervals.

In addition to the domiciliary cases, mothers who have booked to have their confinements in the St. Katharine's Maternity Hospital also attend the ante-natal clinic at 44 Hoghton Street.

The attendances made by domiciliary cases at these Ante-Natal Clinics during 1950 were as follows :—

	First Visits	Re-Visits	Total
Doctors' Clinics	37	84	121
Nurses' Clinics	—	84	84
TOTALS	37	168	205

Post-Natal Services.—All mothers who have not made arrangements to be examined by their own doctors are invited to attend the Post-Natal Clinic which is held each week at 44 Hoghton Street. The Clinic is conducted by Mr. N. E.

Laurence, the Obstetric Specialist, and 354 mothers attended during 1950. In addition 315 re-visits were made making a total of 669 visits during the year ; 48 attendances were made by Health Visitors at Post-Natal Clinics.

Child Welfare Centres.—There are six Centres in the town and in addition to the normal work, each Centre distributes the dried milk and vitamin foods issued by the Ministry of Food. As in the past the ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1950 and their efforts and enthusiasm contributed in no small measure to the steady progress which was maintained throughout the year.

Since the inauguration of the National Health Service, there has been a tendency for Voluntary Societies to cease or limit their interest and help in the various branches of the service.

The efforts of the Infant Welfare Centre Committee, however, shows an appreciation of the need for a continuance and development of voluntary work of this kind. The Medical Officers and Health Visitors working in the Centres have the highest regard for the co-operation of the voluntary workers and the freer outlook and wider scope possible to the Voluntary Society is of great help. This is especially evident in the instructional side of the work. The teaching of parent-craft and the annual display of articles, together with the presentation of prizes to the winning Centres creates wide interest amongst the parents.

The commencement of clubs for the mothers attending the Centres is also a progressive development and gives opportunities not only for Social events, but for the training of mothers in the care of their children.

The following statement shows the attendances made at the Centres during 1950 :—

	Hamp- ton Rd.	High Park	Liver- pool Rd.	Cros- sens	Derby Road	Ains- dale	TOTALS
INFANTS —							
First Visits	126	131	121	71	159	56	664
Re-visits	1997	2226	2043	1337	2120	1099	10822
CHILDREN OVER 1 AND UNDER 5 YEARS—							
First Visits	—	—	—	—	—	1	1
Re-Visits	988	1077	956	868	841	805	5535
Total Attendances	3111	3434	3120	2276	3120	1961	17022
No. of Sessions	46	94	46	47	47	46	326
Average No. of Attendances per Session	67.6	36.5	67.8	48.4	66.4	42.6	52.2

During the year the Health Visitors made 690 attendances at the Welfare Centres.

Maternity Dental Clinic.—This Clinic is held at 2 Church Street and there are two sessions each week for expectant and nursing mothers and children under five years of age who are not attending primary schools maintained by the local Education Authority. When dentures are required by expectant and nursing mothers the necessary arrangements are made with private dental mechanics in the town. Patients requiring X-ray examination are referred to the Dentist at the Southport Infirmary.

The following tables show the work done at the Maternity Dental Clinic during 1950 :—

(a) Number of Cases Treated :—

	Examined	Found to be in need of Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers.....	18	18	18	18
Children under 5	241	211	211	211
TOTALS	259	229	229	229

(b) Forms of dental treatment provided :—

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and Gum Treatment	Silver Nitrate Treatment	Dressings	Radiographs	Dentures provided	
		Local	General						Complete	Partial
Expectant and Nurs- ing Mothers	6	6	—	2	9	—	3	—	—	—
Children under 5 ...	58	50	—	59	6	132	—	—	—	—
TOTALS ...	64	56	—	61	15	132	3	—	—	—

Day Nurseries.—There are two Day Nurseries in the town, one being in King Street with accommodation for 60 children and one at Bedford Park with accommodation for 40 children. Since the 5th July, 1948 when the maximum daily charge was reduced from 4/2d. to 1/6d. the demand for day nursery accommodation has increased considerably and it has been necessary to examine the family circumstances of each particular case before arranging for admission. For this purpose preference is given to the following classes of mothers :—

- Mothers who are the sole support of the family, e.g. widows, unmarried mothers, and cases where the husband is not able to work.
- Mothers who are working and whose husbands are unemployed.
- Cases where there is sickness in the home and
- Mothers who are employed in hospitals, laundries, factories, hotels, shops, etc. and there is financial hardship in the family.

Despite this system of priority there is always a waiting list at both nurseries of mothers coming within one of the categories mentioned above.

It will be remembered that in 1949 the Council approved the purchase of a plot of land between Part Street and Talbot Street to be used as a site for a new 60 place Day Nursery to enable the King Street premises to be released to the

Church Trustees. Towards the end of 1950 the District Valuer informed the Council that he had reached an agreement with the owners for the sale of the land and the Ministry of Health subsequently approved the purchase of the site and the erection of the new nursery. It is hoped that the building of this Nursery will be commenced early in the year 1952.

The Nursery Nurses Training Scheme was continued in 1950 and a further ten students were appointed to take the course. During their two years of training the students receive practical and theoretical instruction which qualifies them for more senior appointments in nurseries. The training is also helpful to those students who intend to take up hospital nursing as a career. This scheme is organised by the Education Department and Health Department and the students receive their practical training in the Day Nurseries and the Nursery Schools and Classes. By arrangement with the Lancashire County Council, the theoretical training is done at the Penwortham Centre.

At the end of the year there were twelve trainees employed at the Day Nurseries; six being first year students and six second year students.

The following table shows the attendances at the Day Nurseries during 1950 :—

	King Street	Bedford Park
(1) Number of places provided	60	40
(2) Mondays to Fridays—		
(a) Attendances	13453	8722
(b) Number of days open	253	253
(c) Average daily attendance.....	53.2	34.5
(3) Mondays to Saturdays		
(a) Attendances	14546	8897
(b) Number of days open	304	302
(c) Average daily attendance.....	47.8	29.4

Care of Premature Infants.—The decision as to whether a premature infant can be nursed satisfactorily in its own home lies with the doctor in attendance and if he considers that removal of the infant to one of the Maternity Hospitals is advisable, this step is carried out, the infant being removed in a warmed cot which is available for the purpose. Special cots are also supplied on loan to mothers who are nursing their infants at home.

A close liaison is maintained between the matrons of the lying-in hospitals and Superintendent Health Visitor in respect of premature births and before such an infant is discharged from the maternity hospital, the necessary information is passed on to the Superintendent Health Visitor who, with her staff, accepts responsibility for the care of the child after discharge.

Frequent visits are made by the District Health Visitor until the infant reaches normal weight and after this stage the usual routine visits are made as in other cases.

The following table shows the number of premature infants born during the year :—

PREMATURE INFANTS BORN DURING 1950

(Premature infants are babies whose weight at birth is 5½ lbs. or less)

Born at :—	HOME			Totals	NURSING HOME			Totals	HOSPITAL			Grand Totals	
	Under 3-lbs.	3—4 lbs.	4—5½ lbs.		Under 3-lbs.	3—4 lbs.	4—5½ lbs.		Under 3-lbs.	3—4 lbs.	4—5½ lbs.		
Weight at Birth :—													
1. No. Notified (After adjustments for transfers)	1	—	1	2	—	—	2	2	4	6	49	59	63
2. No. in (1) above who													
(a) Died within 24 hours	1	—	—	1	—	—	—	—	1	1	1	3	4
(b) Died 2nd to 7th day	—	—	—	—	—	—	—	—	1	—	—	1	1
(c) Died 8th to 28th day	—	—	1	1	—	—	—	—	2	1	—	3	4
(d) Survived 28 days.....	—	—	—	—	—	—	2	2	—	4	48	52	54
Totals	1	—	1	* 2	—	—	2	2	4	6	49	59	63
3. Percentage who survived 28 days.....	None	—	None	None	—	—	100%	100%	None	66%	98%	88%	86%

*(NOTE.—The two premature infants born at home were transferred to hospital).

Care of Unmarried Mothers and their Babies.—Unmarried Mothers are usually found, before the birth of the child, either by the Health Visiting or Midwifery Staff or by the mother approaching the Health Department for help and advice. In the first instance the mother is seen by the Obstetric Specialist at the Central Ante-Natal Clinic and, having regard to the circumstances of the particular case, a decision is made as to whether the confinement shall take place in one of the Maternity Hospitals or in the girl's own home. At the same time, arrangements are made for her to attend one or other of the Ante-Natal Clinics at regular intervals.

In addition, the services of the Voluntary Moral Welfare Committee's Social Worker are available to the Department and the Social Worker maintains a close contact with the Superintendent Health Visitor.

A register of illegitimate children in the borough is kept and this is reviewed at regular intervals by the Superintendent Health Visitor, her staff, and the Moral Welfare Worker. In this way the individual circumstances of each child are examined from time to time and the necessary action is taken to improve unsatisfactory conditions where these exist.

During 1950 there were 32 illegitimate births and details of these are shown below :—

	Southport	Others	Total
Remained with parent or relative	20	2	22
With foster-mother	2	—	2
Admitted to Children's Home	1	—	1
Adopted	4	2	6
Died	1	—	1
TOTALS	28	4	32

Municipal Midwifery Service.—Throughout the year the staff consisted of the Supervisor of Midwives, who worked half-time on the district, and two full-time midwives. As in the previous year, the services of one of the private midwives in the town were also available for relief work when necessary. All the midwives mentioned above are qualified to administer gas and air analgesia.

The following statement shows the work done by the department's midwives during the year.

	As Midwife	As Maternity Nurse	Total
(1) Number of cases attended	50	24	74
(2) Number of cases in (1) above who received gas and air analgesia	32	7	39
(3) Number of cases in (1) above for whom medical aid was summoned during the year			
(a) Where the medical practitioner had arranged to provide the mother with maternity medical services under the National Health Service Act			33
(b) Other cases			6
TOTAL			39

(4) Number of visits made by municipal midwives during the year :—	
(a) Ante-Natal	756
(b) Nursing	1330
Total Number of Visits	<u>2086</u>

In addition, the midwives made a total of 143 attendances at the Ante-Natal Clinics which were held at 44 Houghton Street.

Midwives in Private Practice.—During the year fourteen private midwives notified their intention to practise on the district. Only seven of these, however, were actually engaged in midwifery work and the following statement shows the work done in 1950. Three of the seven midwives mentioned above are qualified to administer gas and air analgesia.

	As Midwife	As Maternity Nurse	Totals
(1) Number of cases attended	27	37	64
(2) Number of cases in (1) above who received gas and air analgesia.....	1	8	9
(3) Number of cases in (1) above for whom medical aid was summoned			
(a) Where the medical practitioner had arranged to provide the mother with Maternity Medical Services under the National Health Service Act			7
(b) Other Cases			3
TOTAL			<u>10</u>
(4) Number of visits of inspection made by non-medical Supervisor to Midwives in their own homes			<u>70</u>

Maternity Nursing Homes.—The following table shows the number of maternity cases dealt with by private Nursing Homes during the year :—

	As Midwife	As Maternity Nurse	Total
(1) Number of Cases	22	40	62
(2) Number of cases in (1) above who received gas and air analgesia.....	—	3	3
(3) Number of cases in (1) above for whom medical aid was summoned			7
(4) Number of practising midwives employed in private nursing homes at the 31st December, 1950			<u>6</u>

(5) Number of midwives in (4) above who are qualified to administer gas and air analgesia	1
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Maternity Hospitals.—The two Maternity Hospitals in the town are administered by the Southport and District Hospital Management Committee and the following table shows the number of cases dealt with during 1950 :—

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	Total
(1) Number of cases attended			
(a) As Midwife	389	307	696
(b) As Maternity Nurse.....	119	80	199
TOTALS	508	387	895
(2) Number of cases in (1) above who received gas and air analgesia			
(a) As Midwife	345	202	547
(b) As Maternity Nurse.....	79	40	119
TOTALS	424	242	666
(3) Number of cases in (1) above for whom medical aid was summoned	134	52	186
(4) Number of practising Midwives on the staff at end of year	6	5	11
(5) Number of Midwives in (4) above who are qualified to administer gas and air analgesia	5	4	9

Distribution of Maternity Cases.—The following table shows the percentage of maternity cases dealt with during 1950 by the various services and similar figures are also shown for the previous year :—

Service	1950		1949	
	No. of Cases	%	No. of Cases	%
Municipal Midwives	74	6.7	77	6.5
Private Midwives	64	5.8	62	5.5
Nursing Homes	62	5.6	104	8.8
Christiana Hartley Maternity Hospital	508	46.1	541	46.4
St. Katharine's Maternity Hospital	387	35.1	381	32.5
Others	8	0.7	4	0.3
TOTALS	1103	100.0	1169	100.0

SUMMARY OF MIDWIFERY STATISTICS FOR YEAR 1950

	No. of Cases			No. of Cases in Column (3) who received gas and air analgesia			No. of Cases in Column (3) for whom medical aid was summoned (7)
	As Midwife (1)	As Maternity Nurse (2)	Total (3)	As Midwife (4)	As Maternity Nurse (5)	Total (6)	
DISTRICT CASES—							
Municipal Midwives	50	24	74	32	7	39	39
Private Midwives	27	37	64	1	8	9	10
TOTALS	77	61	138	33	15	48	49
INSTITUTIONAL CASES—							
Christiana Hartley Maternity Hospital	389	119	508	345	79	424	134
St. Katharine's Maternity Hospital	307	80	387	202	40	242	52
Nursing Homes	22	40	62	—	3	3	7
TOTALS	718	239	957	547	122	669	193
GRAND TOTALS	795	300	1095	580	137	717	242

HEALTH VISITING

The Health Visiting Service provides general care for nursing and expectant mothers and young children and in addition, is available for the purpose of giving advice to persons of all ages in the town who are suffering from illness. The Health Visitors also assist families by providing them with information concerning the other health services which are available.

The following table shows the work done by the Health Visitors during 1950 :—

	First Visits	Re-Visits	Total Visits
EXPECTANT MOTHERS	771	427	1198
<hr/>			
CHILDREN UNDER 1 YEAR—			
Routine	973	6255	7228
Prematurity	28	—	28
Stillbirth.....	17	—	17
Immunisation	—	63	63
Illness	—	38	38
Miscellaneous	—	21	21
	1018	6377	7395
<hr/>			
CHILDREN 1 TO 5 YEARS—			
Routine	—	9962	9962
Infectious Disease	—	13	13
Other Illness	—	35	35
Miscellaneous	—	164	164
	—	10174	10174
<hr/>			
OTHER CASES—			
Infectious Disease	—	7	7
Old People	181	554	735
Miscellaneous	31	—	31
	212	561	773
<hr/>			
Summary			
EXPECTANT MOTHERS	771	427	1198
CHILDREN UNDER 1 YEAR	1018	6377	7395
CHILDREN AGED 1 TO 5 YEARS	—	10174	10174
OTHER CASES	212	561	773
	<hr/>		
TOTALS	2001	17539	19540
<hr/>			

In addition the Health Visitors made 690 attendances at Welfare Centres and 48 attendances at the Post-Natal Clinics during the year.

The work done by the Health Visiting Service in regard to tuberculous patients is shown in the section of this Report dealing with Infectious and Other Diseases.

HOME NURSING

The Southport and Birkdale District Nursing Society continued to provide the Home Nursing Service on behalf of the Local Health Authority under the arrangements which were agreed when the National Health Service came into operation in July, 1948. This service is noteworthy for the friendly spirit of co-operation which exists between the Voluntary Society and the local Health Authority and there is no doubt that the District Nurses are making a very valuable contribution to the town's Health Services. The Joint Home Nursing Sub-Committee comprising members of the Voluntary Society and the Local Health Authority met on a number of occasions during the year to discuss various matters concerning the administration of the Service and these meetings proved very helpful.

The table shows the work done by the service in 1950 :—

	Classification of Cases							TOTAL
	A	B	C	D	E	F	G	
No. of Cases on Register at beginning of year	149	40	4	1	—	3	—	197
No. of cases added during year	1239	273	9	35	60	128	14	1758
	1388	313	13	36	60	131	14	1955
No. of Cases discontinued during year	1200	284	8	32	56	126	14	1720
No. of Cases on Register at end of year	188	29	5	4	4	5	—	235
No. of Visits made during year :—								
(a) By District Nurses.....	31562	7219	499	262	340	809	113	40804
(b) By Corporation Midwives	86	—	—	—	—	—	—	86
Total No. of Visits	31648	7219	499	262	340	809	113	40890

CLASSIFICATION OF CASES

A	Medical—Adults	E	Schoolchildren
B	Surgical—Adults	F	Children under 5 years of age
C	Tuberculosis Cases	G	Complications of pregnancy
D	Notifiable Diseases		

STAFF

	Full Time	Part Time	Total Equivalent to Full Time
Number employed at beginning of year	11	3	13½
Number appointed during year	4	1	4½
	15	4	18
Number leaving during year	4	—	4
Number employed at end of year.....	11	4	14

DIPHTHERIA IMMUNISATION

The diphtheria immunisation scheme continued as in previous years and, in addition to the work done by general practitioners, regular immunisation sessions were held at the Health Department and also at the Welfare Centres.

The following table shows the number of children who received a full course of primary immunisation or a re-inforcing injection during the year :—

	Primary Immunisations	Re-Inforcing Injections
(a) CHILDREN AGED—		
(1) 0 to 4 years	767	13
(2) 5 to 14 years	63	515
TOTALS	830	528
(b) DONE BY—		
(1) General Practitioners	331	288
(2) Health Department's Staff	499	240
TOTALS	830	528

The percentage of children immunised at the end of 1950 is shewn below together with similar figures for the previous year :—

	1950			1949		
	Age Groups			Age Groups		
	0—4	5—14	Total 0—14	0—4	5—14	Total 0—14
Total No. of children who had completed full course of primary immunisation at any time up to the 31st December	3327	8685	12012	3267	8814	12081
Estimated child population (Mid-Year)	5137	9601	14738	5117	9623	14740
Percentage of children immunised.....	64.76	90.46	81.50	63.84	91.60	81.90

SMALL POX VACCINATION

The smallpox vaccination scheme was continued by the general practitioners as in the previous year on the same lines as for the diphtheria immunisation scheme.

The following table shows the number of persons vaccinated and re-vaccinated in 1950 :—

	1950				1949			
	Age Groups				Age Groups			
Number of persons :	0—4	5—14	Over 14	Total	0—4	5—14	Over 14	Total
(a) Vaccinated ...	229	28	47	304	154	11	35	200
(b) Re-vaccinated	8	25	183	216	2	9	97	108

AMBULANCE SERVICE

The Service continued to be organised in conjunction with the Fire Service, as in the previous year. The Ambulance Depot is situated at the Fire Station in Manchester Road and the arrangements for the administration of the two services have proved to be most satisfactory.

Although the work of the Ambulance Service increased considerably during 1950 the work was at all times carried out in a prompt and efficient manner and reflects credit on all those engaged in the service.

During the year the Fire and Ambulance Committee considered the possibility of installing radio apparatus in two of the ambulances and it was hoped that this matter would be dealt with early in 1951. It is believed that this arrangement would enable a more efficient and economical service to be provided and would obviate the necessity of ambulances having to return to the station on the completion of each journey.

Throughout the year the number of vehicles available for the service was five ambulances and one sitting-case car.

The following statement shows the work done by the Service in 1950 and similar figures are also given for the previous year.

	1950		1949	
	No. of Cases	Mileage	No. of Cases	Mileage
(1) REMOVAL OF CASES—				
Accident	836	4162	679	3319
Maternity	256	1704	253	1595
Sickness	12570	76194	8840	65926
Infectious Disease.....	188	3129	243	4217
Mutual Assistance to other				
Local Authorities	57	1625	161	1580
Inter-Hospital Removals	497	6532	267	4331
Total No. of Cases removed	14404	93346	10443	80968
(2) OTHER WORK—				
Removal of bodies to Mortuary	99	453	68	406
Ambulance not required	409	1221	237	704
Miscellaneous	100	796	70	524
TOTALS	608	2470	375	1634
SUMMARY—				
(1) Removal of Cases	14404	93346	10443	80968
(2) Other Work	608	2470	375	1634
*	15012	95816	10818	82602
*ANALYSIS—				
Inside Borough	14121	53848	9953	41782
Outside Borough	891	41968	865	40820
	15012	95816	10818	82602

PREVENTION OF ILLNESS—CARE AND AFTER-CARE

General.—The general work done in regard to prevention of illness, care and after-care, is shown in the sections of this report dealing with the Health Visiting, Mental Health and Tuberculosis Services.

Sick-Room Equipment.—As in the previous year, this Service continued to be dealt with by the Southport and Birkdale District Nursing Society. This method of organisation has proved both efficient and economical as the majority of cases requiring sickroom equipment are already being visited by the District Nurses and the articles required can be supplied at the same time. A small charge is made for the hire of the equipment, but in cases of hardship the fee may be reduced or cancelled.

During 1950 sick-room equipment was supplied to 230 patients as compared with 164 in the previous year.

Diphtheria Immunisation.—The publicity scheme in regard to diphtheria immunisation was continued throughout 1950 as in previous years. The arrangements are as follows :—

- (a) Leaflets and Posters are distributed to Welfare Centres and School Clinics.
- (b) When a baby has attained the age of 8 months a letter is sent to the mother strongly advising her to arrange for the immunisation of her child. In addition, the Health Visitors are required to visit all mothers whose babies have not been immunised and make every effort to ensure that the infant is protected against the disease.
- (c) In regard to children who have already been immunised, further letters are sent to the parents at the appropriate times stressing the importance of “re-inforcing” injections being given to maintain the state of immunity throughout the years the child is attending school.
- (d) Particulars of schoolchildren who have not been immunised are also obtained from the Head Teachers and these cases are followed-up by the staff of the department.

Welfare Centres.—Posters, leaflets and other publicity material relating to general health and hygiene measures were supplied to all the Welfare Centres during the year. As an experiment, the ladies of the Voluntary Infant Welfare Committee commenced a “Mothers Club” at the Hampton Road Welfare Centre in January and regular weekly evening sessions were held during the winter months. Towards the end of the year a similar Club was also commenced in Ainsdale for the benefit of mothers living in that area. In addition to social activities, various classes have been organised dealing with subjects which are of special interest to mothers who have young children in their families, e.g. cookery, sewing and dress-making, etc. Instructional film shows have also been arranged and talks have been given by members of the department’s Health Visiting Staff. There is no doubt that Clubs of this kind form a very useful link with the normal work which is done at the Welfare Centres and it is to be hoped that the scheme may be extended to other parts of the town in the future.

Co-operation with Hospitals.—During the year the Almoners of the local Hospital Service referred a number of cases to the department where the services of a district nurse or home help seemed to be indicated. All these cases were visited and the necessary help was provided.

As mentioned elsewhere in this report, the Tuberculosis Visitor continued to attend the Tuberculosis Treatment Clinics which are held at the Southport Infirmary, thereby maintaining an effective liaison between the hospital and district work in regard to the service.

This method of co-operation is of the greatest value, both to the hospital and district service, and for this reason it is hoped that it will be possible to extend this scheme by making arrangements for one of the Health Visiting staff to attend the Geriatric Out-Patient Clinic which is to be commenced at the Promenade Hospital early in the year.

Sick Room Helpers' Scheme.—The object of this new service is to provide assistance to households where one of the family is ill and the responsibility of caring for the patient is causing anxiety and distress to the other member of the home. In particular, this service is intended to give help in the following circumstances :—

- (a) Where a patient is living alone and there is no help, or where nursing care is only available at odd times, e.g. from neighbours.
- (b) Where the responsibility for the nursing of the patient falls entirely on one other member of the household.

In such cases the patient may be seriously ill, and yet for one reason or another early admission to hospital may not be possible. The nursing of the patient may then be a considerable strain on the other member or members of the household, and any relief which can be given, even if only of a temporary nature, may be of considerable help.

The Sick Room Helper takes her instructions from the doctor or district nurse attending the case, and she carries out the normal nursing care which ordinarily would be done by relatives or friends if they were available.

The full cost for the service is 1/9d. per hour, but this fee may be reduced or cancelled in cases of financial hardship.

The service was commenced in April, and although only a small amount of work was done in 1950, it is hoped that it will be possible to develop the scheme more satisfactorily during the coming year.

The following table shows the number of cases assisted during the nine months from April to December.

Number of cases at commencement of period	—
Add—Number of new cases	18
	<hr/>
	18
Deduct—Number of cases discontinued.....	15
	<hr/>
Number of cases at end of period	3
	<hr/>
Number of Applications received	*21
	<hr/>
Number of cases assisted	18
	<hr/>
(*In three cases the request for help was withdrawn by the applicants.)	
Number of hours worked by Helps	1395
	<hr/>

	Staff (all Part-time)
Number at commencement of period	—
Add—Number engaged during period	6
	<hr/>
	6
Deduct—Number leaving	3
	<hr/>
Number of Staff at end of period	3
	<hr/>
Number of Visits to Homes by Organiser.....	50
	<hr/>
Number of Persons interviewed at Office	69
	<hr/>

HOME HELP SERVICE

The Services of a Home Help can be provided in the following circumstances :—

- When a person is ill.
- For expectant and nursing mothers.
- For elderly persons who are infirm or ill.
- To households where there is a mental defective in the family and
- In any case when it is considered that the services of the Home Help would relieve anxiety and distress.

The maximum charge for the service is 2/6d. per hour, but on application being made this fee may be reduced or cancelled in cases of financial hardship. All the helps so far enrolled have been part-time ; the amount of time each can devote to the work has varied according to their domestic circumstances, as many of them are married women with families.

The following statement shows the work done by the Service during 1950 :—

	Classification of Cases			Totals
	A	B	C	
Number of cases on register at beginning of year.....	14	33	23	70
Number of new cases during year	28	58	93	179
	<hr/>	<hr/>	<hr/>	<hr/>
Number of cases discontinued during year	42	91	116	249
	39	75	66	180
	<hr/>	<hr/>	<hr/>	<hr/>
Number of cases on register at end of year	3	16	50	69
	<hr/>	<hr/>	<hr/>	<hr/>
Number of applications received.....	27	64	105	196
Number of cases assisted	24	58	98	180
	<hr/>	<hr/>	<hr/>	<hr/>
Number of cases not assisted	3	6	7	16*
	<hr/>	<hr/>	<hr/>	<hr/>
Number of hours worked by helps	1539	6379	9904	17822

*In 16 cases the request for help was withdrawn by the applicants.

Classification of Cases

A.—Maternity

B.—Sickness.

C.—Old Age.

Staff (All Part-Time)

Number of helps employed at beginning of year	17
Number appointed during year	20
	<hr/> 37
Number leaving during year	17
	<hr/> 20
	<hr/> <hr/>
Number of visits to homes by Organiser	636
	<hr/> <hr/>
Number of persons interviewed at Office	1318
	<hr/> <hr/>

MENTAL HEALTH SERVICE

The work of this department continued steadily throughout the year. In the main the work done comprises that of ascertainment, certification and the domiciliary care of mental defectives, and the procedures connected with the ascertainment and admission to hospital of patients who are mentally ill. The after-care of patients discharged from hospital and arrangements designed towards the prevention of mental illness are also duties which belong to this service.

In June, the staff was increased by the appointment of a teacher of handicraft who visits the mentally defective persons in their own homes. For one session each week a group of the children attend at 44 Hoghton Street where they receive instructions in handicrafts. This work has been a great help to the parents and relatives who know that for a short time each week the child is cared for, instructed and interested in the various kinds of work.

The training varies according to the age and ability of the patients. Some have simple exercises in sense training. Others are occupied in more advanced work such as embroidery, rug-making, reading and writing.

A summary of this work is given later in this section of the report.

During the year the Education Committee referred six cases under Section 57(3) of the Education Act 1944. These children are referred to the Mental Health Department owing to the fact that they have been found to be suffering from a disability of mind which renders them incapable of receiving education in the ordinary schools.

Similarly three children were referred to the Mental Health Service under the terms of Section 57, para. 5 of the Education Act 1944 intimating that for the purposes of the Mental Deficiency Act 1913, they were suffering from a disability of mind which might warrant the need for supervision after leaving school.

In Southport on 31st December, 1950, the cases of Mental Deficiency being dealt with were as follows :—

40 under supervision at home ;

4 under guardianship ;

88 in institutions.

Six cases, of which three were in “a place of safety,” were awaiting admission to Institutions.

It is realised that there is a lack of accommodation in suitable institutions for these cases. This applies not only to this area but all over the country, and is due not only to insufficient beds, but also to lack of staff.

The responsibility to provide this accommodation lies at present with the Regional Hospital Boards and the appropriate department of the Ministry of Health.

Mental Deficiency.—Table Showing number of Southport patients in Mental Deficiency Institutions as at the 31st December, 1950 :—

	Male	Female	Total
Calderstones	17	15	32
Brockhall	12	12	24
Royal Albert	4	1	5
Liseaux Hall	6	—	6
Greaves Hall	5	—	5
Moss Side (State)	1	1	2
Swinton Home	1	—	1
Ashton House	—	1	1
Gillibrand Hall	—	1	1
Newchurch Homes	—	6	6
Whitecross Homes	2	1	3
St. Lawrence's Hospital	1	—	1
The Ellen Terry Home	1	—	1
	50	38	88

Home Teacher for Mental Defectives

Summary of work for period 12th June to 31st December, 1950

Number of cases on register at beginning of period	10
Number of new cases added	9
	—
	19
Number of cases taken off register	1
	—
Number of cases on register at end of period	18
	==

Details of Training

(1). At Homes of Mental Defectives :—

(a) Number of visits made to mental defectives in their own homes 579

(b) Kinds of training provided :—

Physical work, speech, sense and number training, money and time values, eurhythmics, painting, modelling, basketry, music, embroidery, knitting and sewing.

(2). At the Centre :—

(a) Number of sessions held during period 6th October to 31st December 1950	11
(b) Total number of attendances made by mental defectives during the period	42
(c) Number of defectives attending Centre at end of the period....	4
(d) Kinds of training provided :— Physical and rhythmic training, handwork, sense training, singing and games.	

Mental Illness

Lunacy Act 1890 and Mental Treatment Act, 1930

(a) ADMISSIONS—	No.
Ormskirk Mental Hospital (Sec. 20 Lunacy Act 1890)	81
Ormskirk Mental Hospital (Sec. 21(1) Lunacy Act 1890)	6
Rainhill Mental Hospital (Sec. 16 Lunacy Act 1890)	2
Rainhill Mental Hospital (Sec. 1 Mental Treatment Act 1930)	11
Winwick Mental Hospital (Sec. 20 Lunacy Act 1890)	2
Winwick Mental Hospital (Sec. 21(1) Lunacy Act 1890)	1
Winwick Mental Hospital (Sec. 16 Lunacy Act 1890)	7
Winwick Mental Hospital (Sec. 1 Mental Treatment Act 1930)	3
Whiston Mental Hospital (Sec. 20 Lunacy Act 1890)	3
Upton Mental Hospital (Sec. 20 Lunacy Act 1890)	1
Whittingham Mental Hospital (Sec. 16 Lunacy Act 1890)	1
Sefton Park General Hospital (Sec. 21(1) Lunacy Act 1890)	1
Cheadle Royal Hospital (Sec. 16 Lunacy Act 1890)	1
Cheadle Royal Hospital (Sec. 4-5-8 Lunacy Act 1890)	1
TOTAL	<u>121</u>
(b) Admissions to Mental Hospitals from observation wards at the County Hospital, Ormskirk :—	
Section 16—Lunacy Act, 1890	5
Sections 4, 5 and 8—Lunacy Act, 1890.....	1
TOTAL	<u>6</u>
(c) Certifications for continued detention at Ormskirk Mental Hospital :—	
Section 16—Lunacy Act 1890.....	5

(d) Cases referred for investigation under Lunacy Acts and Mental Treatment Acts	218
(e) After-care—Visits to cases discharged from Mental Hospitals	123
(f) Total of notified discharges and deaths in mental hospitals from 1st January 1950 to 31st December 1950. :—	

	Discharged	Departed	Relieved	Recovered	Died	Total
January.....	6	—	—	1	2	9
February	4	—	—	—	2	6
March	1	1	1	—	5	8
April	6	1	1	—	3	11
May	5	—	—	1	1	7
June	5	—	5	2	4	16
July	3	1	2	2	3	11
August	4	—	1	2	5	12
September	1	1	1	1	5	9
October	4	—	2	—	5	11
November	1	1	2	1	1	6
December	4	2	3	—	1	10
	44	7	18	10	37	116

CENTRES AND CLINICS

ADDRESS	DAY	TIME
CHILD WELFARE CENTRES—		
1. Methodist Church, Ainsdale.....	Mondays	2 to 4 p.m.
2. North Road, Crossens	Wednesdays	2 to 4 p.m.
3. Methodist School, Liverpool Road	Tuesdays	2 to 4 p.m.
4. Poulton Road, High Park	Tuesdays	2 to 4 p.m.
Do. do.	Wednesdays	2 to 4 p.m.
5. Hampton Road	Thursdays	2 to 4 p.m.
6. Methodist School, Derby Road	Fridays	2 to 4 p.m.
ANTE-NATAL CLINICS :—		
44 Hoghton Street	Wednesdays	9-30 to 10-30 a.m.
Do.	Thursdays	2 to 4 p.m.
POST-NATAL CLINICS :—		
44 Hoghton Street.....	Mondays	2-30 to 3-45 p.m.
TUBERCULOSIS CONTACT CLINIC :—		
Southport Infirmary	Mondays	2 to 5 p.m.

Part III

SANITARY CIRCUMSTANCES
OF THE AREA

SANITARY CIRCUMSTANCES OF THE AREA

Water.—The water supply is maintained by the Southport and District Water Board, which is a combination of the local authorities of the County Borough of Southport, the Urban District of Formby, and the West Lancashire Rural District. The Board supplies water within the area of these three authorities and also in part of the Ormskirk Urban District.

There are five pumping stations owned by the Water Board, and these are situated six to ten miles south-east of the town. The water from Scarth Hill does not come into Southport.

The wells and boreholes are all over 200 feet deep. Owing to the depth of the wells and the nature of the strata the possibilities of contamination are remote. The water has no plumbo-solvent action, and although somewhat hard is exceptionally pure, both chemically and bacteriologically. The water from the Blundell House pumping station (opened in July, 1934) shows a marked difference from the others, being a much softer supply.

During 1949 a new deep borehole at Scarisbrick was completed. Samples of water taken during the Yield Test showed a notably high standard of bacteriological purity for a water from a newly completed borehole.

Samples of the water are taken regularly.

Chemical Analysis, 23rd February, 1950

The water is hard with a temporary hardness of 255 parts per million and a permanent hardness of 102 parts. It therefore has a total hardness of 357 parts per million.

	Parts per Million
Total solid matter in solution.....	456
Oxygen required) in 15 minutes	0.10
to oxidise) in 4 hours	0.27
Ammoniacal Nitrogen as N.	None
Albumoid Nitrogen as N.	None
Nitrous Nitrogen as N.	None
Nitric Nitrogen as N.	Minute trace
Combined Chlorine	28.3

Bacteriological Examination, 27th February, 1950

Number of Bacteria on agar at 37°C. for 48 hours	=	0 per 1 c.c.
Number of Bacteria on agar at 22°C. for 48 hours	=	0 per 1 c.c.
B. Coli in water examined	=	0 per 100 c.c.
Total coliform organisms in water examined	=	0 per 100 c.c.
Class 1 :		Highly satisfactory.

Thanks are due to Mr. N. B. Bennett, AM.Inst.C.E., M.Inst.W.E., the Water Board Manager, for providing the following statement of analyses made of the water obtained from the various pumping stations.

Analyses of Samples of Water taken from the Pumping Stations
15th November, 1950

	Halsall Lane P.S.	Springfield P.S. (Filtered)	Bickerstaffe P.S. (Filtered)	Blundell House P.S. (Filtered)
Chemical Results in parts per million				
Appearance	Clear and Bright	Clear and Bright	Clear and Bright	Clear and Bright
Colour	Nil	Nil	Nil	Nil
Odour	Nil	Nil	Nil	Nil
Reaction pH.....	7.0	7.3	7.2	6.9
Free Carbon Dioxide	26	19	28	24
Electric Conductivity at 20°C.	485	650	770	360
Total Solids dried at 180°C.	325	435	515	240
Chlorine in Chlorides	22	32	18	23
Nitrogen in Nitrates	1.2	0.0	0.0	0.0
Nitrites	Absent	Absent	Absent	Absent
Metals	Manganese 0.03	Iron less than 0.03	Absent	Iron 0.04 Manganese 0.03
Free Ammonia	0.000	0.000	0.064	0.000
Albuminoid Ammonia	0.000	0.000	0.000	0.000
Oxygen absorbed in 4 hours at 27°C. ...	0.00	0.00	0.50	0.35
Hardness : Permanent	60	80	125	45
Temporary.....	185	260	310	130
Total	245	340	435	175
(Total Hardness : Degrees Clarks Scale)	17.2	23.8	30.5	12.3
Bacteriological Results				
Number of Colonies developing—				
On Agar per c.c. in 3 days at 20°C. ...	0	0	0	5
1 day at 37°C. ...	0	0	0	0
2 days at 37°C. ...	1	0	0	0
Presumptive Coli-aerogenes Reaction				
Present in	—	—	—	—
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.
Bact-coli (Type 1)				
Present in	—	—	—	—
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.
Clostridium Welchii Reaction				
Present in	—	—	—	—
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.

Report :

The samples were reported as being clear and bright in appearance and free from metals, excepting negligible traces of iron and manganese. The waters vary from hard to very hard in character but contain no excess of saline or mineral constituents in solution. They are of the highest standard of organic and bacterial purity.

Houses supplied from other sources than the Town's supply :—Eight houses continue to be supplied from seven shallow wells adjacent to the premises.

Public Baths.—The Victoria Baths near the Pier have ample bathing accommodation, which in addition to three open sea-water swimming baths, comprises 45 Slipper baths, two “ Zotofoam ” and “ Pine Bubble ” baths, and a suite of Turkish and Russian baths. The number of bathers attending during the twelve months ending 31st March, 1950, was 190,945.

The large Open-Air Bathing Lake in Princes Park is available for mixed bathing, and has a water surface area of over 55,000 square feet.

The sea water supplied to these baths is so treated by filtration and chlorination that the bath water proves to be of exceptional purity. The bacteriological findings in regard to samples from these baths taken on 26th June, 1950, are as follow :

Summary of Findings	Bathing Lake	Victoria Baths
Organisms at 37°C.....	6 per c.c.	8 per c.c.
Organisms at Room Temperature	8 per c.c.	6 per c.c.
B. Coli	Nil	Nil
Streptococci	Nil	Nil
Cl. Welchii.....	Nil	Nil

With regard to the smaller baths at Canning Road and Compton Road these continued to be freely used.

The Canning Road Baths had an attendance of 5,712 during the year, and the Compton Road Baths an attendance of 6,836.

SANITARY INSPECTION OF THE AREA

Drainage.—Complaints received regarding choked and defective drainage systems of houses numbered 1,101, and the necessary cleansing, repairs and alterations were supervised.

Household Refuse.—The work of collection and disposal of refuse is the responsibility of the Borough Engineer’s Department.

Shops.—The administration of the Shops Act is carried out by the Weights and Measures Department. Defects under Section 10 of the Shops Act, 1934, have been referred to the Sanitary Department, and have been dealt with.

Schools.—The regular inspection of the sanitary arrangements at the schools have continued, and the standard of cleanliness has been well maintained.

Hostel.—One common lodging house exists in the Borough, and has been visited on forty-five occasions. The conditions under which this house is conducted have on the whole been satisfactory and considerable improvements are being carried out.

FACTORIES

Statistical information, prepared in the manner required by the Ministry of Labour and National Service is shown as follows :—

Factories Act, 1937 (Part I).

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises (1)	Number on Register (2)	Number of		
		Inspec- tions (3)	Written notices (4)	Owners prose- cuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	476	27	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	772	89	4	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority † (excluding out-workers' premises)	2	2	—	—
TOTAL	1250	118	5	—

† *i.e.* Electrical Stations [Section 103(1)], Institutions. (Section 104) and sites of Building Operations and Works of Engineering Construction (Sections 107 and 108).

2.—CASES IN WHICH DEFECTS WERE FOUND

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more “cases”)

Particulars (1)	Number of cases in which defects were				Number of cases in which prosec- utions were instituted (6)
	Found (2)	Remi- edied (3)	To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1.).....	4	4	—	3	—
Overcrowding (S.2.)	—	—	—	—	—
Unreasonable temperature (S.3.).....	—	—	—	—	—
Inadequate ventilation (S.4.)	—	—	—	—	—
Ineffective drainage of floors (S.6.)...	—	—	—	—	—
Sanitary Conveniences (S.7.)					
(a) insufficient	3	3	—	2	—
(b) Unsuitable or defective.....	—	—	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	6	6	—	4	—
TOTAL	13	13	—	9	—

OUTWORK						
Nature of Work	Section 110			Section 111		
	No. of out-workers in Aug. list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-whole-some premises	Notices served	Prosecutions
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing Apparel— Making, etc.	16	—	—	—	—	—
TOTAL	16	—	—	—	—	—

Smoke Abatement.—Forty-eight observations were made during the year, and in no case was it found necessary to institute legal proceedings.

Pest Control.—Vermin (other than rodents). The department has continued throughout the year to assist and advise on the control of insect pests. The measures employed included spraying with insecticides, and the use of powder insecticides.

RODENT CONTROL

The Rodent Control Service started in March 1944 as a result of the Infestation Order 1943 continued to operate throughout the year.

The Prevention of Damage by Pests Act 1949 became operative on the 31st March 1950 and repealed the Rats and Mice Destruction Act 1919. The principal differences under this Act are that the local authority is now charged with the responsibility of carrying out such inspections and surveys as may be necessary to ascertain that land within their district is kept free of rats ; and, the local authority is also responsible for the supervision of all land which includes agricultural holdings previously supervised by the County Agricultural Executive Committee.

There is one Rodent Operator and he is able to cover the work by means of motor transport. The staff of Sanitary Inspectors assist him in surveying the areas in their own districts. The services of the operator are available on application being made by occupiers of premises which are infested and a duty is laid upon them to notify the Local Authority, in writing, if rats or mice are found on land in substantial numbers. The occupier of premises or land is still responsible for the work of disinfestation of his property.

The definition of land in the act includes land covered with water and any building or part of a building.

It should be remembered that apart from the vast amount of destruction caused by rats and mice, these rodents may also be carriers of disease germs which can be transmitted to man by the contamination of food. It is important, therefore, to take all steps which are possible to assist the department in this work.

The following table shows the work done during the year :—

Prevention of Damage by Pests Act, 1949
Report for the Year 1950

1. PREVALENCE OF RATS AND MICE							
TYPE OF PROPERTY	Number of Properties in Local Authority's Area				Analysis of Column (iv)		
	Total	in which infestation was :			Number Infested by		
		Notified by Occupier	Other-wise Discov-ered	Recorded Total of (ii) and (iii)	RATS		MICE ONLY
					Major	Minor	
	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)
Local Authority Property	169	18	12	30	—	25	5
Dwelling Houses	24604	92	20	112	—	59	53
Business Premises	3611	64	31	95	—	58	37
Agricultural Property ...	44	1	1	2	—	2	—
TOTALS	28428	175	64	239	—	144	95

2. MEASURES OF CONTROL BY LOCAL AUTHORITY													
Type of Property	No. of Prop- erties Ins- pected	No. of Ins- pect- ions made	Number of Notices Served Under Section 4		Number of Treatments carried out :—				Block Treatment of Properties in Diff- erent Occupancies Under Section 6(i) or by Informal Arrangement				
			Treat- ments	Works	By arrange- ment with Occupier		Under Section 5 (i)		No. of Blocks	Sur- face	Assoc- iated Sew- ers		
					Rats	Mice Only	Rats				Mice Only	No. of Sepa- rate Occu- pan- cies	No. of Man- holes
							Major	Minor					
Local Authority's Property ...	85	119	—	—	25	5	—	—	—	—	—	—	
Dwelling Houses	489	665	—	—	59	53	—	—	—	—	—	—	
Business Premises	368	499	1	—	58	37	—	—	—	2	42	—	
Agricultural Property	40	131	—	—	2	—	—	—	—	—	—	—	
TOTALS	982	1414	1	—	144	95	—	—	—	2	42	—	

Summary of Visits.—During the year the total number of visits made by the Inspectors was 20,161 classified as follows :—

Nuisances

COMPLAINTS—NUMBER INVESTIGATED—

(1). Housing Defects	872
(2). Choked and Defective Drains	1078
(3). Emission of Smoke	20
(4). Accumulation of Offensive Matter	77
(5). Miscellaneous	440
TOTAL	2487

INSPECTIONS—

Dwelling houses	1396
Common Lodging Houses	43
Common Yards, Back Roads and Passages	114
Horse-manure Middensteads	13
Pigstyes	165
Offensive Trades	288
Rag Flock Premises	10
Places of Public Entertainment	3
Public Sanitary Conveniences	208
Tents, Vans and Sheds	25
Abattoir	722
Broker's Premises	—
Ashes Receptacles (Ashpits and Dustbins)	75
Conversions (Earth Closets and Bristol Ejects to W.C.'s)	43
Smoke Observations	48
Testing Drains :	
By Smoke	44
By Breaking down	104
Insufficient Water Supply	5
Factories Act, 1937 :	
Factories with mechanical power	131
Factories without mechanical power	14
Shops Act, 1934	64
Fried Fish Shops	105
Fishmongers and Greengrocers	647
Butchers' Shops	1263
Grocers' Shops	1299
Bakehouses.....	212
Canteens.....	2
Public Houses, Beer Houses, etc.	15
Food Preparing and Storing Places	1271
Dairies	413
Ice Cream Premises	697
Samples procured for Bacteriological Examination :	
Milk	449
Ice Cream	115
Other Foodstuffs	16
Water	24
Samples of Milk procured for Biological Examination	6
Samples obtained under the Food and Drugs Act, 1938 :	
Milk	131
Other Foodstuffs	188
Samples of Water (Chemical)	12
Infectious Disease Visits	747
Diseases of Animals Acts and Orders	4
Prevention of Damage by Pests Act, 1949	2070

Inspections of Dwellinghouses and other premises for vermin infestation	162
Visits to work in progress	4644
Visits re Housing Survey	219
Miscellaneous Visits (Interviews, etc.)	1935
TOTAL	<u>20161</u>

Nuisances.—The number of schedules of cases recorded for abatement was 2,248.

In all cases the usual verbal request for the abatement of nuisances found was made, but in 1151 instances it was necessary to serve written notices as follows :—

Preliminary	1076
Statutory	75
TOTAL	<u>1151</u>

Part IV

HOUSING

HOUSING

General.—The number of inhabited houses totalled 24,626.

The following table shows the number of houses built during the period 1935 to 1950. It should be noted that no houses were built in the years 1941 to 1945 inclusive.

Year.....	1935	1936	1937	1938	1939	1940	1946	1947	1948	1949	1950
Number of houses built ...	420	384	385	249	308	42	310	163	156	126	102

Fitness for Habitation.—The standard of fitness of houses in the Borough continued to be generally good. Owing to the increased cost of materials and labour, it has been found that far more interviews with owners and revisits to properties have had to be made to see that notices were complied with and this has thrown greater work on to the Inspectors of the department.

Overcrowding.—The number of complaints regarding alleged overcrowding received during the year was 51, of which 22 were subsequently found to be overcrowded by visitation of the Sanitary Inspectors. In all instances where overcrowding was found to occur the matter was referred to the Housing Department requesting that assistance be granted in these cases.

HOUSING STATISTICS

1. Inspection of dwelling houses during the year :—

- | | |
|---|-------|
| (1) (a) Total number of dwelling houses inspected for housing defects (under the Public Health and Housing Acts)..... | 1,615 |
| (b) Number of inspections made for the purpose | 4,644 |
| (2) Number of dwelling houses found not to be in all respects reasonably fit for human habitation | 1,151 |

2. Remedy of defects during the year without service of formal notices :—

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers.....	1,379
--	-------

3. Action under statutory powers during the year :—

A.—Proceedings under the Public Health Act :—

- | | |
|--|-----|
| (1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied | 75 |
| (2) Number of dwelling houses in which defects were remedied after service of formal notices :— | |
| (a) By owners | 65 |
| (b) By Local Authority in default of owners | Nil |

B.—Proceedings under Sections 9 to 12, Housing Act, 1936 :—

- | | |
|---|-----|
| (1) Number of dwelling houses demolished as a result of formal procedure under Section 11 | Nil |
|---|-----|

(2)	Number of dwelling houses demolished as a result of informal notices preliminary to formal procedure under Section 11	Nil
(3)	Number of dwelling houses closed but not demolished as a result of undertakings (which have not been cancelled) by owners under Section 11 not to use the houses for human habitation	Nil
(4)	Parts of buildings closed (Section 12)	Nil
(5)	Number of persons displaced as a result of action under (1) to (4) above	Nil
(6)	Number of dwelling houses made fit—	
	(i) as a result of formal notices under Sections 9 to 12	Nil
	(ii) as a result of informal notices preliminary to formal procedure under Sections 9 to 12	Nil

Part V

INSPECTION AND SUPERVISION
OF FOOD

FOOD STANDARDS

Three hundred and nineteen samples of food were taken and submitted to the Public Analyst for chemical analysis.

The results showed that 302 were genuine and 17 were adulterated or otherwise giving rise to irregularity ; the latter included 6 formal and 11 informal samples.

All the samples certified as not genuine were followed up, and appropriate action was taken. Full details were forwarded to the Ministry of Food.

List of Samples Found to be Adulterated or otherwise giving rise to irregularity

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
29 Informal ... } 2 Formal }	Thyme— Contained a slight excess of sand.	Formal sample taken. Slight excess of sand. Letter sent to packer drawing his attention to this.
35 Informal	Dessicated Soup— Contained lead equivalent to 14 parts per million.	No legal proceedings taken. Formal sample taken and found to be free from excessive metallic contamin- ation, viz. Lead 2 parts per million.
4 Informal	Milk— Deficient of fat to the extent of 10% (Fat 2.70) (3% of which is due to added water) and of solids, not fat, to the extent of 1% (Total solids 8.40%). The Freezing Point depression indicates the presence of 3% of added water (Freezing Point (Hortvet)—0.527° C.)	Formal sample taken—Fat 3.05%, Solids, not fat 8.30%. Milk of abnormal composition.
15 Formal	Milk— Contained 4½% added water.	Two "Appeal to Cow" samples taken —one contained 2.60% fat and 8.10% solids not fat and the other contained 2.50% fat and 8.00% solids not fat—Milks of abnormal composition.
71 Formal	Beef Sausages— Deficient of meat to the extent of 16% (Total meat 42%).	Case dismissed. Defence produced certificate from independent Analyst showing 50% meat, in the third portion.
113 Informal	Orange Squash— Consisted of ready-to-drink orange drink. The descrip- tion "squash" implies a soft drink intended for consump- tion after dilution.	Attention of packer drawn to this description. Label altered to "Orange Drink."

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
129 Informal	Synthetic Cream— Synthetic Cream containing 110 parts of Formaldehyde per million.	Formal Sample No. 130 taken at the place of delivery. (<i>See below</i>).
130 Formal	Synthetic Cream— contained 110 parts of Form- aldehyde per million.	The third portion was submitted to the manufacturers. Legal advice obtained to the effect that proceed- ings could not be instituted against the manufacturers whose factory was situated in Belfast, Northern Ireland. The Town Clerk contacted the Min- istry of Food who undertook to take action in Northern Ireland. The manufacturers stated that the pre- sence of formaldehyde was due to the sterilising agent used in the plant and undertook to change this agent.
131 Informal	Milk— Deprived of 18% of its original milk fat.	This information was forwarded to the M.O.H. of the Lancs. County with the request for a follow up sample. The County M.O.H. reported that the follow up sample was found to be genuine.
138 Informal	Aberdeen Emulsion— Consisted of an emulsion of arachis oil in a rancid condi- tion. The free acid present makes the sample unpalatable.	This was a consignment of Emulsion which had been presented by the Voluntary Maternity and Child Wel- fare Organisation to the Department and which was known to be old stock. The entire stock has been disposed of for animal feeding stuffs.
163 Informal	Tomato Soup— Contained 230 parts of tin per million, equivalent to 1 3/5 grains per lb. The accepted maximum limit of tin in can- ned goods is 2 grains per lb.	The attention of the canners was drawn to the undesirable quantity of tin in the soup. The remainder of the stock was surrendered and destroyed.
176 Informal	Crab Paste— Slightly deficient in fish.	No further sample available
214 Informal	Cake Flour Mixture— Deficient of sugar to the extent of 38%.	Formal sample taken. (<i>See below</i>).
245 Formal	Sweetened Cake Flour Mixture— Deficient of sugar (total sugar 16%) and infested with living mites.	Legal proceedings instituted against vendor. Summons concerning sugar deficiency dismissed. Summons con- cerning mite infestation—Fine of £5. No costs awarded in either case.

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
249 Formal	Milk— Contained 5½% added water.	Warning letter issued by the Town Clerk.
252 Informal	Sausage— Contained insect.	Legal proceedings taken. Case dismissed.

**Table showing particulars of the number of samples taken for
Bacteriological Examination—Year 1950**

Nature of Samples and Specimens	Number of specimens procured for submission to bacteriologist for bacteriological examination				
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
FOOD AND DRINK—					
Ice Cream	—	67	41	7	115
Milk	50	187	137	75	449
Other Foods	1	5	9	1	16
*Water	1	1	17	5	24
TOTALS	52	260	204	88	604

*Intended for human consumption.

DISTRIBUTION OF MILK

There are 110 distributors of milk on the register of the local authority of whom 108 have their premises inside the Borough. The premises are inspected regularly and samples are frequently submitted for bacteriological examination. During the year 449 samples of milk were submitted to the Bacteriologist for examination of which 315 were Pasteurised, 22 Sterilised, 46 Tuberculin Tested (Pasteurised), 34 Heat treated, 28 Undesignated and 2 Tuberculin Tested Certified. Of these samples six Pasteurised samples failed the Phosphatase Test and three failed the Methylene Blue Test; one T.T. (Pasteurised) Milk failed the Phosphatase Test and one failed the Methylene Blue Test; seven undesignated samples failed the Methylene Blue Test and the remainder proved to be satisfactory. In all instances where the Pasteurised Milk Samples failed the Phosphatase Test, the milk was examined by means of guinea pig inoculation for T. Bacilli. In addition six samples of raw undesignated milk were submitted for biological examination but in no instance was T. Bacilli found.

In all instances where unsatisfactory samples were obtained the premises were thoroughly examined and the equipment tested with a view to finding the source of the failure. In every case where unsatisfactory milk samples were obtained from producers outside the Borough, the information was submitted to the appropriate authority.

It will be seen that the quality of milk sold in the Borough has maintained a very high level in that 4% only were found to be unsatisfactory.

The number of samples taken for chemical analysis was 130, of which 4 were reported by the Public Analyst to be adulterated or otherwise giving rise to irregularity. Details of the four are given on pages 62 and 63.

Sale of Milk under Designation

Classification of Licences issued	Number of Licences issued during the year	
	1949	1950
(1) Milk (Special Designation) (Raw Milk) Regulations 1949		
<i>“Tuberculin Tested”</i>		
Dealers’ Licences authorising the use of the special designation <i>“Tuberculin Tested”</i> in relation to milk sold from the holder’s premises	49	49
Supplementary Licences authorising the use of the special designation <i>“Tuberculin Tested”</i> in relation to milk sold by retail from the holder’s premises outside the Borough	3	1
(2) Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations 1949—		
<i>“Pasteurised”</i>		
Dealers’ (Pasteurisers’) Licences authorising the use of the special designation <i>“Pasteurised”</i> in relation to milk treated by the pasteurising process at the holder’s premises	2	6
Dealers’ Licences authorising the use of the special designation <i>“Pasteurised”</i> in relation to milk sold from the holder’s premises	8	53
Supplementary Licences authorising the use of the special designation <i>“Pasteurised”</i> in relation to milk sold by retail from the holder’s premises outside the Borough	1	1
<i>“Sterilised”</i>		
Dealers’ Licences authorising the use of the special designation <i>“Sterilised”</i> in relation to milk sold from the holder’s premises	13	15
Supplementary Licences authorising the use of the special designation <i>“Sterilised”</i> in relation to milk sold by retail from the holder’s premises outside the Borough	—	1
TOTALS	78*	126

*Two licences re “Accredited” Milk were issued in 1949 under the previous regulations.

FOOD INSPECTION

Details of the food inspected and rejected as unfit for human consumption are set out below :—

Carcases Inspected and Condemned
Public Abattoir

PARTICULARS	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed.....	4421		2990	14780	349
Number of carcasses inspected ...	4421		2990	14780	349
RESULTS					
All diseases except tuberculosis :—					
Number of whole carcasses condemned	—	1	19	25	22
Number of carcasses of which some part or organ was con- demned	915	761	12	1037	40
Percentage of the number in- spected affected with disease other than tuberculosis	37.93		1.03	7.18	17.77
Tuberculosis only :—					
Number of whole carcasses con- demned	5	53	—	—	4
Number of carcasses of which some part or organ was con- demned	503	811	—	—	34
Percentage of the number in- spected affected with tuber- culosis	31.03		Nil.	Nil.	10.88

The condemnations of whole carcases shown in the above table were due to tuberculosis (sixty-two), septicaemia (one), oedema (nine), peritonitis (fifteen), pyaemia (seventeen), pneumonia (three), moribund (seven), fevered (five), erysipelas (three), spetic peritonitis (two), pleurisy (two), jaundice (one), septic metritis (one), and melanosis (one). All the animals, except four, were brought into the abattoirs from outside the Borough.

Summary of meat and other articles of food which were found
to be diseased or unwholesome

	Cwts.	Qrs.	Lbs.
Beef.....	833	3	6
Veal.....	7	3	23
Mutton	28	3	15
Pork	53	3	25

	Cwts.	Qrs.	Lbs.
Fish.....	16	3	1
Poultry, Game, Rabbits	1	1	21
Fruit	—	3	7
Tinned Goods.—			
Milk	30	2	20
Meat	22	0	5
Fish.....	1	2	23
Vegetables	11	3	11
Fruit	25	1	6
Cereals	—	3	25
Jam	3	0	2
Miscellaneous	9	3	20
	1049	0	14
<hr/>			
TOTAL.....	52 tons,	9 cwts,	14 lbs.
	<hr/>		

All the meat was sent for salvage and converted into technical/industrial substances. The remaining diseased or unsound food was destroyed.

The whole of the food listed was voluntarily surrendered and no legal action was necessary to safeguard public health.

FOOD HYGIENE

The appointment of a designated post of Food Hygiene Officer in the latter part of last year has proved of the greatest value.

This step allows for concentration of effort in regard to the subject of Food Hygiene and as a result the progress gained during the year has been very satisfactory.

Traders dealing with food stuffs in any way have, when it has been desired, received help and advice regarding their premises and working conditions which has been valuable.

The department has received a great measure of co-operation from those engaged in such trades. Some difficulty has been experienced by the proprietors of firms in obtaining licences to carry out improvements in their premises. It has been possible for the department to assist in this respect by officially supporting approved schemes and where this procedure has been adopted licences have been granted.

Lectures on the subject of Food Hygiene have been given to various voluntary organisations by the Chief Sanitary Inspector and the Food Hygiene Officer. The latter also gives short talks to workers in kitchens, bakeries, etc., when he visits the various premises.

To assist the trades in the interpretation of the existing laws relating to food, Codes of Practice were prepared for each food industry and these have been distributed to all traders.

For some years the Department had been considering the necessary steps which should be taken to improve the methods of handling, storing and distributing foodstuffs.

Fortunately the town has been singularly free from serious outbreaks of poisoning due to contaminated food but it is common knowledge today that improvements in the methods of handling food are urgently needed. The importance of hygienic methods as these relate to food requires to be understood by everyone who handles or prepares food for consumption.

It was felt that in order to obtain this some course of teaching on the subject should be available. Two years previously a short four lecture course on Food Hygiene had proved reasonably successful but a broader outlook on this matter seemed indicated.

The Principal of the Technical College was approached to see if the course could be held in the College. He explained that the St. John Ambulance Association intended to hold a course of lectures in Personal Hygiene along the lines of the syllabus in use by the association. As a consequence the Medical Officer of Health, and other members of the staff met representatives of the local branch of the St. John Ambulance Association.

After some discussion it was obvious that the best way of dealing with the matter would be by creating a combined course under the aegis of the St. John Ambulance Association, but staffed by the Health Department.

This arrangement was submitted to the County Director of the Association who approved and undertook to obtain the approval of the Central Committee.

The Health Committee fully endorsed these arrangements and agreed to make a grant towards the cost of each course.

A Syllabus of Lectures was prepared by the department and this was approved by the Association.

The course is a comprehensive one and consists of eight lectures and demonstrations. Lectures are given by the Deputy Medical Officer, the Chief Sanitary Inspector and the Food Hygiene Officer. The Pathologist and Bacteriologist of the Southport Infirmary gave a lecture on bacteriology as this applies to Food Hygiene and the Public Analyst, came from Liverpool to give a lecture and demonstration on his branch of the subject.

One hundred and twenty-seven students attended the course and eighty-three of these sat for an examination on the subject, 69% passed and were granted certificates by the St. John Ambulance Association.

The numbers enrolling were sufficient to warrant a second course in the early months of the present year.

The arrangement with the Association appears to be a very happy one and works smoothly. There is an advantage it is believed in so far as the certificate granted by the Association should be recognised in other areas.

The following tables show the number of inspections made in regard to premises dealing with foodstuffs and the improvements so far effected.

(A) Summary of Inspection

INSPECTIONS	NUMBER
Hotels, Restaurants, Kitchens and Fried Fish Shops	638
Bakehouses.....	205
Butchers Shops	74
Confectioners' Shops	24
Cockle and Shrimp Boilers	49
Fishmongers', Greengrocers' and Poulterers'	108
Food Factories	44
Food Vehicles	4
Grocers	180
Ice Cream Premises	321
Snack Bars	167
Miscellaneous	414
TOTAL	2228

(B) Summary of Improvements Effected

Major structural improvements and reconstruction <i>e.g.</i> new kitchens provided or kitchens completely reorganised	4
Minor structural improvements, cleansing and repairs	193
Improved food storage facilities	13
Equipment renewed, repaired and cleansed	44
Improved washing-up facilities and procedure	40
Improved sanitary accommodation for staff including personal washing facilities	12
Improved sanitary accommodation for patrons.....	7
Improved refuse storage facilities	16
Vermin eliminated	6
TOTAL	335

The Bacteriological quality of Ice Cream on sale throughout the Borough has continued to improve and the percentage of unsatisfactory samples, 26.95%, compares very favourably with 52.2% unsatisfactory samples in 1949. In all instances where unsatisfactory samples are obtained the premises are visited and energetic steps are taken, including samples of the product at various stages of production, to endeavour to find the cause for the unsatisfactory product. The number of premises used in connection with the manufacture, sale and storage of Ice Cream is set out below :—

PARTICULARS	NUMBER
For the purpose of manufacture and sale	25
For the purpose of sale	173
TOTAL	198

One hundred and fifteen samples of ice-cream were procured and submitted for bacteriological examinations.

The Ministry of Health Provisional Grading of Ice-Cream is divided into four grades as follows :—

- GRADE I the ice-cream, after incubation, does not decolourise Methylene Blue in 4 hours.
- GRADE II. the ice-cream, after incubation, decolourises Methylene Blue in 2 hours to 4 hours.
- GRADE III the ice-cream, after incubation, decolourises Methylene Blue in $\frac{1}{2}$ hour to 2 hours.
- GRADE IV. the ice-cream, after incubation, decolourises Methylene Blue immediately.

Grades I and II are regarded as satisfactory : Grades III and IV as unsatisfactory.

The following table shows the gradings of the 115 samples taken :—

GRADE I	GRADE II	GRADE III	GRADE IV	TOTAL
42	42	12	19	115

Part VI

PREVALENCE OF, AND CONTROL
OVER, INFECTIOUS AND OTHER
DISEASES

INFECTIOUS DISEASES (Table 1)
 Classification of cases notified during the year 1950

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED Ages in Years									TOTAL CASES NOTIFIED IN EACH WARD													Total No. of cases re-moved to Hospital		
	At all ages	Age unknown	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 upwards	Central	Craven	Heskeith	Marine	Park	Scarisbrick	South	Sussex	Talbot	West	Birkdale East	Birkdale North	Birkdale South		Birkdale West	Ainsdale
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	167	—	—	30	123	9	3	2	—	6	4	29	7	10	22	8	6	1	—	7	8	2	4	21	—
Pneumonia	46	—	—	5	5	5	10	12	9	1	2	5	5	2	1	1	3	—	—	2	9	6	2	5	—
Measles	595	—	14	319	254	5	3	—	—	23	19	139	21	34	92	37	80	27	33	16	10	28	30	6	
German Measles	45	—	1	20	19	2	2	1	—	—	2	7	1	2	2	2	2	2	2	4	7	11	1	—	
Chicken Pox	345	—	4	103	216	12	10	—	—	14	23	42	17	28	19	28	19	13	28	14	14	38	20	28	
Whooping Cough	352	—	17	177	155	1	2	—	—	13	17	67	15	21	23	29	58	27	27	12	12	18	10	3	
Erysipelas	24	—	—	1	—	—	7	8	8	1	—	3	—	1	3	—	1	3	1	—	2	4	1	4	
Dysentery	282	5	6	65	56	12	59	32	47	9	16	29	16	76	41	19	16	13	20	9	8	5	3	2	
Ophthalmia Neonatorum ..	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	
Paratyphoid Fever	2	—	—	—	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Puerperal Pyrexia	2	—	—	—	—	—	2	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	—	
Meningococcal Infection	3	—	1	1	—	1	—	—	—	—	—	1	—	1	—	—	—	—	—	1	—	—	—	—	
Food Poisoning	23	16	5	—	1	—	—	1	—	5	2	1	—	4	6	1	2	—	—	—	—	1	—	1	
Poliomyelitis	2	—	—	—	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	
Malaria	1	—	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	
	1890	21	49	722	830	47	99	57	65	74	87	323	82	179	210	125	187	86	121	73	62	140	71	70	128

INFECTIOUS DISEASES (Table 2)

Number of notified cases and number of deaths for the years 1941 to 1950 inclusive

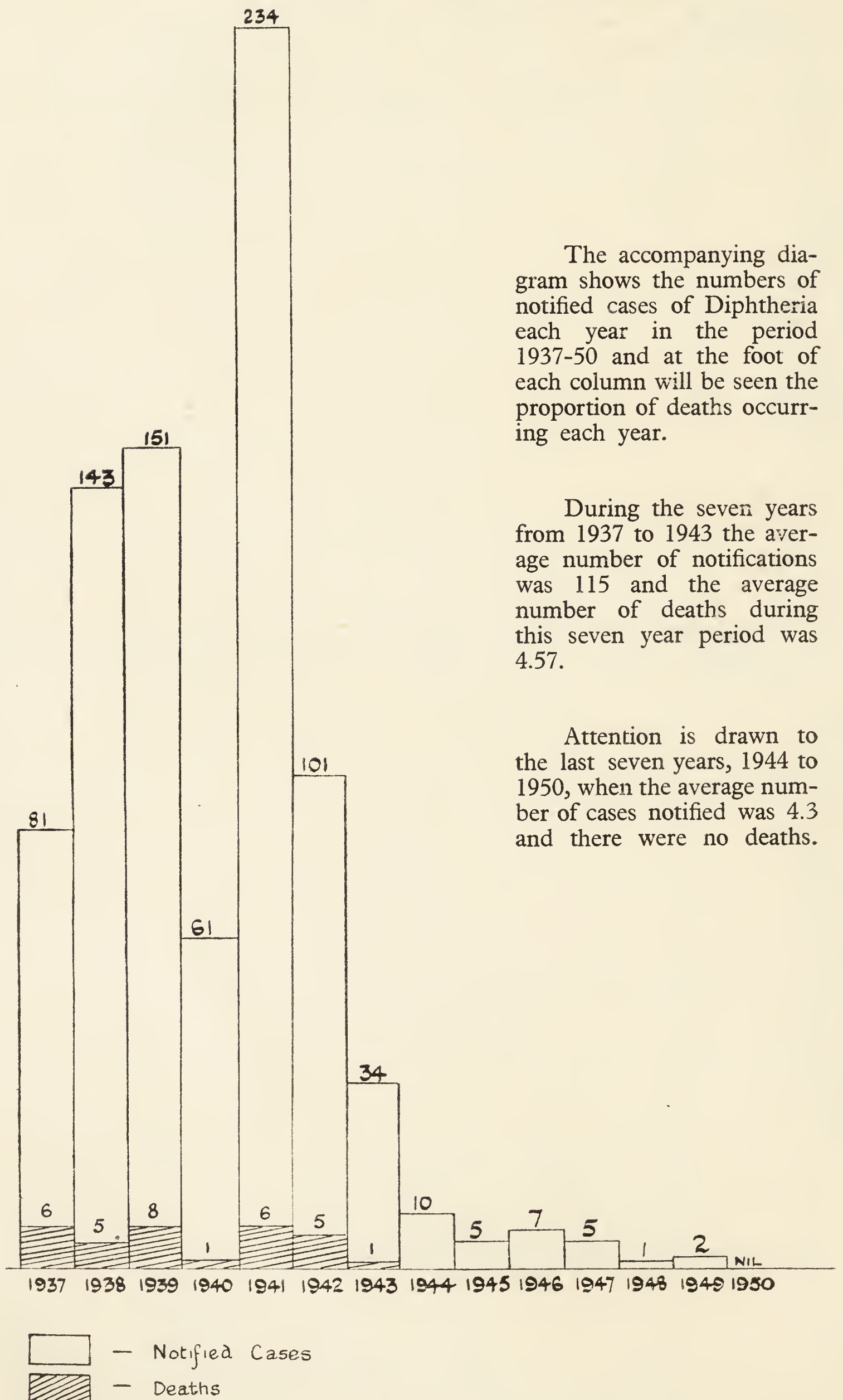
	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										Total Cases for 10 years 1941 to 1950	DEATHS FROM INFECTIOUS DISEASE										Total Deaths during 10 years 1941 to 1950	Case Mortality (of all cases) in Borough and Isolation Hosp. for 10 years 1941—1950
	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950		1941	1942	1943	1944	1945	1946	1947	1948	1949	1950		
Food Poisoning	—	—	—	—	—	—	—	—	1	23	24	—	—	—	—	—	—	—	—	—	1	1	4.17%
Scarlet Fever	381	117	151	140	93	62	167	210	125	167	1613	—	—	1	—	—	—	—	—	—	—	1	0.06%
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	234	101	34	10	5	7	5	1	2	—	399	6	5	1	—	—	—	—	—	—	—	12	3.26%
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	3	—	—	—	—	—	—	—	2	—	5	—	—	—	1	—	—	—	—	1	—	2	40.00%
Para-typhoid Fever	28	2	1	—	—	2	—	—	6	2	41	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	35	24	25	28	26	32	25	33	34	24	286	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	1	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	1	100.00%
Puerperal Pyrexia	12	25	10	5	10	—	2	—	2	2	68	2	—	—	—	—	—	—	—	—	—	2	2.94%
Meninococcal Infection ...	36	13	1	1	4	4	4	—	1	3	67	4	2	1	2	—	1	—	—	—	1	12	17.91%
Polio myelitis	—	—	—	—	—	4	8	3	1	2	18	—	—	—	—	1	1	2	—	—	—	4	22.22%
Polioencephalitis	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis ...	56	74	52	63	69	56	62	51	58	68	609	38	37	43	27	36	31	39	27	26	15	319	52.37%
Other Forms of Tuberculosis	31	28	51	26	26	16	22	17	13	16	246	7	9	9	6	5	3	5	3	5	5	57	23.17%
Ophthalmia Neonatorum ...	—	1	2	2	3	3	1	—	—	1	13	—	—	—	—	—	—	—	—	—	—	—	—
Chicken Pox *	564	676	414	326	274	598	234	506	543	345	4480	—	—	—	—	—	—	—	—	—	—	—	—
Measles *	780	1091	742	741	546	228	1000	788	896	595	7407	—	3	2	3	1	2	1	2	—	—	14	0.19%
German Measles	748	122	157	230	52	83	462	161	55	45	2115	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough *	531	160	368	301	278	76	500	457	277	352	3300	3	—	4	1	2	1	1	1	—	2	15	0.46%

The following additional notifications were received during 1950—Pneumonia (all forms) 46 ; Dysentery 282.

* Chicken-pox, Measles and Whooping Cough were made compulsorily notifiable in Southport in May, 1902, and Cerebro-Spinal Meningitis, Poliomyelitis and Ophthalmia Neonatorum in February, 1912. Measles, German Measles and Whooping Cough :— Only the first case in a house in two months is notifiable.

DIPHTHERIA

Number of notified cases and number of deaths during years 1937 to 1950 inclusive



The accompanying diagram shows the numbers of notified cases of Diphtheria each year in the period 1937-50 and at the foot of each column will be seen the proportion of deaths occurring each year.

During the seven years from 1937 to 1943 the average number of notifications was 115 and the average number of deaths during this seven year period was 4.57.

Attention is drawn to the last seven years, 1944 to 1950, when the average number of cases notified was 4.3 and there were no deaths.

Diphtheria.—In 1935 a clinic was started at which children could be immunised against Diphtheria. In 1938 the Health Committee passed a scheme whereby the local authority undertook to pay fees to the doctors in private practice for immunisation. The scale of fees was approved by the local branch of the British Medical Association.

The aim was to immunise 50% or more of the children in the town against diphtheria.

For the first time it is possible to record that in the year 1950 there were no cases of diphtheria. If this is compared with the year 1941, ten years ago, then in that year there were 234 cases and six deaths. We have had no deaths in Southport from this disease during the past seven years. The present position regarding immunisation is that 65% of children under the age of four are protected and 90% of children aged 5 to 14.

In future it is important that this standard should be maintained. We are indebted to the doctors in general practice for their ready acceptance of the scheme in 1938 and the steady work carried on since then. It has been shown that by continued propaganda and advice the percentage protected can be almost 100% with the result that this disease which once was responsible for so much anguish and misery can be virtually abolished. In England and Wales there were 980 cases of Diphtheria in the year 1950 and 49 deaths.

Scarlet Fever.—167 cases were notified during the year, and of these 57 were removed to the Isolation Hospital. Though the majority of the cases admitted to hospital were mild in type and were sent there because they could not be satisfactorily isolated or nursed at home, it was noted that some were more severe than those occurring in 1949. One child had an attack complicated by endocarditis, but after six months in bed made a complete recovery.

A few comments on this infection may not be out of place in this report.

The severity of the disease is now generally much less than it was at the beginning of this century. The medicaments available for its treatment have progressively improved with the advent of antitoxin, the "sulpha" drugs and penicillin. The result has been that the duration of the illness and the incidence of complications, particularly severe complications, are now much less than formerly. In addition, the general state of nutrition of children developing the infection is better than it used to be and so they are better equipped to combat the disease.

Much has been learned of late years as to the causation of scarlet fever, and it is now clear that the same strain of haemolytic streptococcus which in one person will produce typical scarlet fever, may in another give rise only to tonsillitis or to a sore throat—passed on again, however, it may be the cause of what is called scarlet fever in yet another individual. This explains why the notification and isolation of cases of scarlet fever in hospital has not been as successful as was hoped for in reducing the number of cases and in preventing the spread of the infection. It is for this reason that it is now the practice to admit cases, particularly severe cases, of throat infection to infectious diseases hospitals, whether or not they have a rash and whether or not they fall into the category of notifiable disease.

From the public health and preventive medical standpoint it is just as important to move a case of streptococcal throat infection without a rash out of a house in which a baby is shortly to be born, as it is to move a case of scarlet fever; either case could be the source of puerperal sepsis in the mother and of danger to the baby.

Chicken Pox.—345 cases were notified as compared with 543 in the previous year. One case was removed to hospital under circumstances which did not allow for adequate isolation at home.

Dysentery.—The increase in intestinal infections caused by the dysentery group of organisms has been general throughout the country since the end of hostilities, and the return of many soldiers from abroad. There were 282 cases notified in the town in 1950, as against only 6 in 1949, and at one time it seemed likely that the incidence might become epidemic in character. Forty-nine of the cases were admitted to hospital as against four in the previous year. All, except a small group of cases infected with the Flexner organism in the Southport Infirmary, were infections of the Sonne type.

Erysipelas.—24 cases were notified but none required hospital treatment. The greatly decreased call on hospital accommodation for these cases arises from the improvement in treatment which has been brought about by the sulphonamide group of drugs and by penicillin.

Measles.—The number of cases notified during the year was 595 as compared with 896 in 1949. Nine cases were admitted to hospital either on account of the severity of the disease or lack of facilities for isolation at home. No deaths occurred which were ascribable to this disease.

German Measles.—45 cases were notified as compared with 55 in the previous year. One case was removed to hospital.

Whooping Cough.—352 cases were notified and five of these were admitted to hospital. Two deaths which were due to this complaint occurred during the year.

Pneumonia.—46 cases were notified to the department.

Food Poisoning.—Twenty-three cases of this condition were notified and two were admitted to hospital.

The increased incidence of cases of food-poisoning which has occurred since the war has made it evident that standards of cleanliness in the handling and preparation of food are not as high as they should be. Most of these cases are due to contamination of food with germs, particularly staphylococci and those of the salmonellae group. The dangerous foods are those composed of made up-meat products, such as meat roll, brawn, etc., particularly when they have been kept overnight after preparation and before use. The strictest cleanliness must be observed by those engaged in this trade, and all prepared foods of this kind should be kept in a refrigerator until just before use. It is obvious that one contaminated dish in a restaurant or hotel may be responsible for a large number of cases.

Acute Anterior Poliomyelitis and Polio-Encephalitis.—Two cases were notified one of which was admitted to hospital; the other case was notified when out of the infectious stage.

During 1950 no notifications were received of the following diseases :—

Undulant Fever, or Puerperal Fever.

General.—During 1950 the Infectious Diseases Enquiry Officer made 2,533 visits to cases and contacts. In addition 248 houses in which there had been a cases of infectious disease were disinfected. The Health Visitors also made 20 visits to cases of infectious disease.

TUBERCULOSIS

New Cases and Mortality.—The number of new cases of tuberculosis which came to the notice of the department during the year was 84. Of these, 68 were found to be suffering from pulmonary disease and 16 from non-pulmonary disease. The following table shows the age and sex of these patients together with information regarding the number of persons who died of tuberculosis during the year.

Age Periods (in years)	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0-	—	—	1	—	—	—	—	—
1-	1	—	1	1	1	—	1	—
5-	—	1	1	5	—	—	—	1
15-	3	10	1	1	1	2	1	—
25-	5	10	2	—	1	2	—	1
35-	6	9	—	1	—	1	—	—
45-	9	5	—	—	2	5	1	—
55-	2	3	—	—	—	—	—	—
65 and over	1	3	—	2	—	—	—	—
Totals	27	41	6	10	5	10	3	2

Treatment Clinic.—The 84 new cases came to the notice of the Department in the following ways :—

(a) By primary notifications	45
(b) By transfer from other areas	19
(c) From Death Returns	17
TOTAL	84

All the cases for whom primary notifications were received and all patients transferred from other areas were seen at the Treatment Clinic which is held at the Southport Infirmary. The total number of cases on the Clinic Register at the end of 1950 was 396 and 70 of these patients were found to have sputum containing tubercle bacilli. During the year 50 Treatment Clinics were held and 782 visits were made by patients ; the total number of X-ray examinations of patients was 891.

It should be mentioned that the Southport and District Hospital Management Committee are responsible for the organisation and administration of the Tuberculosis Treatment Clinics.

Contact Clinic.—The local Health Authority is responsible for the Contact Clinics and these are also held at the Southport Infirmary by arrangement with the Hospital Management Committee.

During the year 49 clinics were held and 150 attendances were made by contacts of patients ; the total number of X-ray examinations of contacts was 407. Only two contacts were found to be suffering from pulmonary tuberculosis in 1950.

Domiciliary Visiting.—A Health Visitor with special qualifications is employed by the local Health Authority for the purpose of visiting cases in their own homes to give help and advice to patients and their families. The following table shows the number of visits made by the Tuberculosis Visitor during the year.

To Patients :—	1st Visits	48
	Re-Visits	1700
To Contacts :—	1st Visits	118
	Re-Visits	473
	Total No. of Visits	<u>2339</u>

In addition, the Health Visitor also attends at the Tuberculosis Treatment and Contact Clinics and this arrangement is of great importance for the following reasons :—

- (a) The Visitor has the opportunity of seeing all new patients at the Clinic and this enables her to obtain valuable information in regard to the medical and social circumstances of each individual case. It also ensures that the advice and help given by the Visitor to the domiciliary cases is in accordance with the instructions of the medical staff concerned.
- (b) In regard to cases who attend the clinic at intervals for review, the Tuberculosis Visitor is in a position to obtain the results of the examinations without delay and she can then satisfy the patient on her next visit, as to the progress being made.
- (c) The Visitor's attendance at the clinics also allows her to effect a close liaison with the contacts of patients and assist them with the many problems which often arise when one of the household is found to be suffering from tuberculosis.

During 1950, the Health Visitor made 198 attendances at the Tuberculosis Treatment and Contact Clinics.

Open Air Chalets.—In some cases the Tuberculosis Officer may advise the patient that separate sleeping accommodation is desirable, particularly when there are young children in the family, but on occasions the home circumstances may be such that this cannot be arranged.

To meet this special need the local Health Authority loan open-air chalets to suitable patients on the advice of the Tuberculosis Officer, thereby enabling the treatment to be continued in a more satisfactory manner. During 1950 six chalets were being used by patients on the district.

Care Committee.—The Southport Voluntary Tuberculosis Care Committee continued as in previous years, to provide patients and their families with financial and other assistance. This Committee forms an essential part of the general scheme for tuberculosis patients and all the medical and nursing staff who are engaged in the service are members of this voluntary organisation. During the year the Care Committee provided financial and other assistance to patients and their families to the value of £275. In conjunction with the Tuberculosis Officer and the Health Visitor, the Care Committee are also developing an occupational therapy scheme and suitable patients are provided with the necessary materials, free of charge, to enable them to make various articles at home, such as wool rugs and embroidered tablecloths.

Housing.—In April, the Council approved a revision of the Points Scheme for the purpose of selecting tenants for Corporation houses and, in the amended regulations, special provision was made in regard to tuberculous patients. Additional points are now awarded when either the applicant or his wife, or any of their children are known to be suffering from infectious tuberculosis and this concession should be of some benefit to those cases where improved housing accommodation is desirable for the patient and his family.

During the year nine cases were reported to the Housing Department with a recommendation that special consideration be given in view of the unsatisfactory home conditions of the patients concerned. Although it was not found possible to provide any of these cases with alternative accommodation in 1950, the Housing Department indicated that every effort would be made to re-house them as soon as this became practicable.

VENEREAL DISEASES

At the end of the year 277 patients were under treatment at the clinic as compared with 317 at the close of 1949. The new cases dealt with during the year were classified as follows :—

	Male	Female	Total
Syphilis	7	9	16
Gonorrhoea	11	4	15
Non-Venereal Infections	46	20	66
Cases transferred from other clinics—			
(a) Syphilis	1	1	2
(b) Gonorrhoea	3	—	3
(c) Observation	2	2	4
	<hr/>	<hr/>	<hr/>
	70	36	106
	<hr/>	<hr/>	<hr/>

In-Patient Treatment

OPHTHALMIA NEONATORUM.—No cases were treated during the year.

MATERNITY.—No cases were treated during the year.

Penicillin was again used extensively during the year, and the following number of patients were treated with the drug :—

	Male	Female	Total
Syphilis	6	9	15
Gonorrhoea	11	4	15
Investigation	20	8	28
	<hr/>	<hr/>	<hr/>
	37	21	58
	<hr/>	<hr/>	<hr/>

Examination of contacts.—This was carried out again where necessary and 2 Males and 2 Females were found to be suffering from Gonorrhoea, and 1 Male and 1 Female from Syphilis ; they were still under treatment at the end of the year. 14 children were examined but were found to be free from infection and were discharged.

Part VII

METEOROLOGY

METEOROLOGY

Records for the years 1931 to 1950 inclusive

YEAR	Temperature of the air				Bright Sunshine			Ozone (O3.)	Rainfall				Humidity		Subsoil Water level	
	Mean Temperature °F	Deviation from Normal °F	Absolute Extremes		Duration of Bright Sunshine (Hours)	Deviation from Normal (Hours)	Number of Sunless Days	Mean Daily Ozone (0—10)	Total Rainfall (inches)	Deviation from Normal (inches)	Number of Days with Rain	Duration of Definite Rainfall (hours)	Humidity of the Air at 9 a.m. (% of Saturation)	Deviation from Normal (% of Saturation)	Mean Level of Subsoil Water (inches). Distance below Well-mouth	Deviation from normal (inches)
			Highest °F	Lowest °F												
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
1931	48.4	—1.0	76	20	1362	—145	78	3.8	38.56	+5.39	208	733.6	84	+2	33.2	—6.8
1932	49.3	—0.1	84	21	1407	—100	74	3.4	33.57	+0.40	195	590.6	82	0	63.4	—4.4*
1933	50.0	+0.6	85	19	1618	+111	58	3.1	23.71	—9.46	161	440.0	81	—1	71.9	+4.1
1934	50.2	+0.8	88	23	1479	—28	69	3.7	30.70	—2.47	203	563.3	82	0	—	†
1935	49.8	+0.4	85	19	1573	+66	59	3.9	34.11	+0.94	200	626.1	81	—1	72.1	+4.3
1936	49.1	—0.3	84	22	1331	—176	64	3.6	33.89	+0.72	193	608.1	83	+1	66.6	—1.2
1937	49.1	—0.3	82	21	1344	—163	73	3.1	25.00	—8.17	172	469.2	83	+1	—	§
1938	50.4	+1.0	76	25	1477	—30	55	3.9	36.64	+3.47	201	485.8	80	—2	—	§
1939	49.6	+0.2	82	18	1484	—23	68	3.6	33.91	+0.74	186	555.1	81	—1	66.3	—1.5
1940	48.5	—0.9	83	7	1527	+20	74	3.6	31.69	—1.48	184	583.8	79	—3	70.3	+2.5
1941	48.6	—0.8	88	11	1424	—83	81	3.6	26.91	—6.26	175	528.3	80	—2	70.5	+2.7
1942	48.3	—1.1	78	18	1342	—165	73	3.6	31.30	—1.87	182	617.9	81	—1	73.5	+5.7
1943	49.9	+0.5	88	21	1665	+158	62	4.2	37.88	+4.71	199	614.0	81	—1	67.6	—0.2
1944	49.0	—0.4	78	21	1413	—94	70	3.9	35.41	+2.24	202	587.1	81	—1	68.0	+0.2
1945	50.3	+0.9	81	9	1508	+1	60	3.9	29.46	—3.71	181	446.9	81	—1	67.6	—0.2
1946	48.9	—0.5	77	17	1537	+30	72	3.6	38.42	+5.25	194	623.9	80	—2	66.5	—1.3
1947	49.0	—0.4	86	14	1444	—63	77	††	30.40	—2.77	184	549.5	81	—1	65.1	—2.7
1948	50.0	+0.6	89	25	1511	+4	69	††	35.26	+2.09	191	521.7	80	—2	68.9	+1.1
1949	50.9	+1.5	83	24	1729	+222	58	††	30.24	+2.93	174	504.2	78	—4	72.3	+4.5
1950	49.1	—0.3	91	19	1556	+49	73	††	36.51	+3.34	204	577.0	79	—3	68.0	+0.2

* New site and well commenced 1931. † Well dry frequently. § Well dry at times. †† Observation ceased.

The information necessary to compile the above table was kindly provided by George A. Lidster, Esq., F.R.Met.S., Borough Meteorologist.

Part VIII

SCHOOL HEALTH SERVICE

(The Forty-second Annual Report
of the School Medical Officer)

EDUCATION COMMITTEE

The Mayor (Councillor R. FLEETWOOD-HESKETH, T.D., J.P., D.L.)

Councillor W. TATTERSALL (*Chairman*)

Alderman T. BALL, J.P. (*Vice-Chairman*)

Alderman Dr. A. W. LIMONT, J.P.

Alderman F. W. REDDAWAY, J.P.

Alderman F. WORSWICK

Councillor W. BERWICK

Councillor P. CARTER

Councillor R. A. C. GREAVES

Councillor R. JOHNSON

Councillor V. B. KILNER

Councillor R. LLOYD

Councillor Mrs. E. SMITH

Councillor E. TOMLINSON, J.P.

Councillor G. B. WOOLFENDEN

Mr. J. E. MARSHALL

The Rev. H. L. GIBBS

Mr. A. LOVERIDGE

Mr. S. W. EXWORTHY

The Very Rev. J. FRANCIS

Representatives on Joint Health and Education Sub-Committee

Chairman

Alderman Worswick

Vice-Chairman

Councillor Tomlinson

Councillor Greaves

SCHOOL HEALTH SERVICE

Routine Medical Inspection.—The arrangements for the Routine Medical Inspection ensure that all children are seen three times during their school life.

During 1950, all junior schools were visited, and the entrants and leavers were examined. The senior schools, King George V, the Girls' High School, Technical College and Art School, also the Modern Secondary Schools were visited, and special attention was given to the leaver group.

Entrants to the senior group schools were examined, prior to admission, at the school clinic.

As in previous years, all children not in one of the three main groups, are examined by the school nurse. Any child who appears to need further examination is then seen by the School Medical Officer. Often such special examinations are also requested by the Head Teacher because of poor school attendance or recent ill-health. The number of such special medical examinations made in school at the time of the routine inspection was 1,253. An innovation this year was the examination of 600 pupils of King George V School by the Mass Radiography Unit.

In Crossens Nursery School, which is recognised for the training of nursery nurses, examination of all children takes place each school term.

The numbers of full routine inspections carried out were :—

PRIMARY SCHOOLS—	1950
Entrants	990
Leavers	942
SECONDARY SCHOOLS AND GRAMMAR SCHOOLS—	
Leavers	661

Attendance at Examination.—The parents of each child are notified of the place and time of examination. The presence of a parent is helpful to the examining Medical Officer, who may want a fuller and more accurate medical history than can be given by the child and the school teacher. In such cases, if the parent does not attend at the school examination, the mother is asked later to come to the school clinic with her child.

It is disappointing this year to find that there is a big decrease in the number of parents attending at all examinations. One reason for this may be the increasing number of mothers who, for economic reasons, take on full-time or part-time work, as soon as their children are of school age. When questioned about their non-attendance, the reply usually is that they realise that they will be sent for if anything abnormal is suspected, so they do not bother to come.

Percentage Attendance at Examination.

PRIMARY SCHOOLS—	1938	1949	1950
Entrants	79.9	77.5	60.7
Leavers	70.3	37.3	25.8
SECONDARY AND GRAMMAR SCHOOLS—			
Leavers	40.8	9.0	1.6

Refusal of Examination.—It is not yet understood by all the parents of the children attending the Local Authority Schools, that under Section 48 of the Education Act, 1944, there is a duty imposed upon them to present their children for examination at the Routine Medical Examination. Only four parents did not want to have their children examined, but after explanation it was agreed to in all cases.

Findings at Routine Medical Inspections

Nutrition.—At the Routine Inspection, all children are weighed and measured, and this, along with the clinical findings, leads to an assessment of the nutritional state.

When watching a group of modern school children at play, it would seem obvious that most of them are healthy and well fed. The observation is amply justified by the following figures, which give the nutritional state of the children who were examined this year and those of the two previous years for comparison.

	Children examined during the year	A. Good	B. Fair	C. Poor
1948	2,633	23.70	69.58	6.72
1949	2,903	25.73	71.03	3.24
1950	2,593	27.96	70.20	1.85

Heights and Weights.—Tables are also given which show the weight and height of children in 1950 compared with those in 1938. It is interesting to note that while the height remains fairly constant, the weights, especially in the older children, show a big increase.

Age last birthday	1938		1950	
	Height Ins.	Weight Lbs.	Height Ins.	Weight Lbs.
Age 5 years				
Boys	42.6	42.4	43.2	43.3
Girls	42.3	41.2	42.0	42.1
Age 11 years				
Boys	54.8	76.6	55.1	78.8
Girls	57.0	77.7	55.4	76.7
Age 13 years				
Boys	59.4	90.3	60.5	94.3
Girls	61.3	90.6	62.5	95.9
Age 16 years				
Boys	66.3	120.7	66.1	133.9
Girls	63.6	117.7	63.5	123.7

School Meals and Milk.—There can be little doubt that the observations in the previous paragraph owe something to the provision of milk and meals for school children. A satisfying and balanced mid-day meal can be had at low cost by all who ask for it, and milk is provided free to all who want it.

Below are given the numbers of children receiving milk and/or meals in one day in October, 1950, with the four previous years for comparison :—

Year	Dinners	Milk
1946	2,593	7,365
1947	3,325	7,112
1948	4,212	7,414
1949	4,023	7,065
1950	4,593	6,910

Some children are provided with free meals. The families to which these children belong are usually suffering some hardship, such as illness or unemployment, and there is a danger of malnutrition in the family. Such mal-nurtition may also result from faulty food habits in the child or mis-management at home. Free meals may be recommended by the Medical Officer in all such cases, and supplied after investigation into the family circumstances. In 1950 free meals were supplied to 567 children.

Cleanliness, Clothing and Footwear

Cleanliness.—It is most unusual to find children who are dirty. Such children usually belong to the problem families of the borough and are persistent offenders.

Below are given tables showing the state of the cleanliness of hair, body and clothing in all groups of school children, along with the figures of last year for comparison.

	Entrants		Primary Leavers		Secondary or Grammar Leavers		All Groups	
	1938	1950	1938	1950	1938	1950	1938	1950
Uncleanliness (Body)	0.1	—	0.5	—	0.6	—	0.4	—
„ (Head)	5.5	0.8	6.3	1.5	7.0	3.0	6.2	2.0
Clothing Unsatisfactory	0.1	—	0.2	0.1	0.3	—	0.2	0.03
Footwear Unsatisfactory	0.1	—	0.4	—	0.5	—	0.3	—

Clothing and Footwear.—It is very rare to find children with unsuitable clothes and footwear. This is very gratifying, especially as the prices of children’s wear continue to rise. Parents are anxious and eager to have their children well and suitably dressed, and readily accept suggestions which may be made.

Hair.—The school nurses spend much time trying to improve the standards of hair cleanliness, and the results show that this is worth while.

During the school year the school nurses paid an average of 6.6 visits of inspection per school. They made 6,546 primary inspections and 13,010 re inspections of children from families where re-infestation was likely to occur. 204 children were excluded during the year for uncleanness of the head.

Percentage of Children found at R.M.I. with nits in the hair

1938	1949	1950
6.0	2.5	2.0

Condition of Children in December, 1950

SCHOOL	Dept.	Boys			Girls		
		Clean	Nits	Vermin	Clean	Nits	Vermin
		%	%	%	%	%	%
All Saints, C.E.	Mixed	100.	—	—	94.44	5.56	—
Do.	Infants	97.78	2.22	—	97.37	2.63	—
Ainsdale, C.E.	Mixed	100.	—	—	100.	—	—
Ainsdale, R.C.	„	100.	—	—	94.12	5.88	—
Birkdale Mod. Sec.	„	100.	—	—	93.72	6.28	—
Birkdale Council	„	95.61	2.63	1.76	92.08	6.93	.99
Do.	Infants	98.46	1.54	—	98.46	—	1.54
Christ Church, C.E.	Boys	99.45	.55	—	—	—	—
Churchtown Council.....	Mixed	99.63	.37	—	97.33	2.67	—
Do.	Infants	100.	—	—	97.09	2.91	—
Crossens, C.E.	Mixed	97.97	2.03	—	98.80	1.20	—
Do. Nursery	Infants	100.	—	—	100.	—	—
Dean Cooke, R.C.	Mixed	97.10	2.90	—	98.08	1.92	—
Emmanuel, C.E.	Infants	100.	—	—	95.70	4.30	—
Farnborough Road	Mixed	98.75	1.25	—	95.51	3.93	.56
Do.	Infants	100.	—	—	97.50	2.50	—
Holy Trinity	Mixed	100.	—	—	98.91	1.09	—
Linaker Street	Infants	96.84	1.05	2.11	97.44	2.56	—
Do.	Mixed	100.	—	—	98.36	.82	.82
Meols Cop Mod. Sec.	Girls	—	—	—	96.58	1.71	1.71
Do.	Boys	99.74	.26	—	—	—	—
Norwood Road Council	Mixed	99.39	.61	—	97.66	2.34	—
Do.	Infants	100.	—	—	98.51	1.49	—
Our Lady of Lourdes	Senior	97.68	1.16	1.16	91.62	7.78	.60
Do.	Junior	100.	—	—	97.30	2.70	—
St. Marie's R.C.	Mixed	100.	—	—	98.36	1.64	—
St. Philip's, C.E.	„	100.	—	—	99.18	.82	—
SS. Simon and Jude	„	97.37	2.63	—	92.91	6.30	.79
St. Teresa's, R.C.	„	93.05	4.17	2.78	98.59	—	1.41

Summary of Cleanliness Examinations—December, 1950

	BOYS		GIRLS		TOTAL	
	No.	%	No.	%	No.	%
Nits	24	0.7	92	3.0	116	1.8
Verminous	8	0.2	14	0.4	22	0.3
Clean	3440	99.1	2968	96.6	6408	97.9

Vaccination.—The number of children vaccinated continued to be low. Of the 2,593 children who were examined at the Routine Inspections, only 34.2% were found to be vaccinated.

Immunisation.—This year we have reason to be pleased with the results of the Immunisation Drive. The following table shows that 93.5% of the children in the Local Authority schools are now immunised.

Summary of Immunisation Returns—November, 1950

SCHOOL	Dept.	Number on Roll	Number Immun- ised	Number Unimmu- nised	% Immun- ised
All Saints', C.E.	Mixed	132	122	10	92.4
Do.	Infants	113	100	13	88.5
Ainsdale, C.E.	Mixed	192	172	20	89.6
Ainsdale, R.C.	"	48	46	2	95.8
Birkdale Modern Secondary	"	475	468	7	98.5
Birkdale Council	"	212	208	4	98.1
Do.	Infants	201	179	22	89.1
Christ Church Mod. Sec.	Boys	200	191	9	95.5
Churchtown Council.	Mixed	544	525	19	96.5
Do.	Infants	204	199	5	97.5
Crossens, C.E.	Mixed	336	312	24	92.9
Crossens Nursery	"	40	39	1	97.5
Dean Cooke, R.C.	"	136	122	14	89.7
Emmanuel, C.E.	Infants	228	221	7	96.9
Farnborough Road Council	Mixed	459	408	51	88.8
Do.	Infants	381	352	29	92.4
Holy Trinity, C.E.	Mixed	331	270	61	81.6
Linaker Street Council	"	317	285	32	89.9
Do.	Infants	268	237	31	88.4
Meols Cop Modern Secondary	Girls	476	457	19	96.0
Do.	Boys	414	395	19	95.4
Norwood Road Council	Mixed	316	292	24	92.4
Do.	Infants	219	214	5	97.7
Our Lady of Lourdes Mod. Sec. ...	Mixed	389	380	9	97.7
Do. R.C. ...	Junior	185	171	14	92.4
St. Marie's, R.C.	Mixed	116	96	20	82.8
St. Philip's, C.E.	"	273	253	20	92.7
SS. Simon and Jude's, C.E.	"	194	180	14	92.8
St. Teresa's, R.C.	"	184	180	4	97.8
High School for Girls	—	488	467	21	95.7
King George V	—	568	531	37	93.5
Technical College	—	200	189	11	94.5
Arts and Crafts	—	30	28	2	93.3
TOTALS		8869	8289	580	93.5

Findings at Routine Inspection

Below is given a table showing a summary of defects found at the Routine Inspections. This year, as in the previous two years, defective teeth have taken second place to defects of the Nose and Throat, as the most common ailments of school children.

Summary of Defects found at Routine Inspection (Percentages)

DEFECTS	Entrants	Primary Leavers	Secondary and Grammar Leavers	All Groups
	Boys and Girls	Boys and Girls	Boys and Girls	Boys and Girls
Malnutrition	3.0	1.6	0.3	1.8
Defective Teeth	9.4	7.3	5.5	7.7
Defects of Nose and Throat	16.4	8.6	3.3	10.6
Enlarged Cervical Glands	1.7	1.0	—	1.1
Defects of Vision	2.5	7.6	4.8	5.0
„ „ Speech	0.4	0.4	—	0.3
„ „ Hearing	1.5	0.9	1.5	1.1
„ „ Circulation	1.1	1.2	0.9	1.1
„ „ Respiration	3.0	0.8	1.2	1.7
„ „ Nervous System	0.4	0.2	0.2	0.2
Skin Disease	2.2	1.4	3.3	2.2
Deformities	7.6	12.4	10.2	10.6

Not all of the defects found at Inspection require treatment. Below is given a table showing the number of children requiring treatment

Number of Children found to be requiring Treatment

	Entrants	Primary Leavers	Secondary and Grammar School Leavers
No. of children examined	990	942	661
No. of children requiring treatment	205	200	80
Percentage Requiring treatment	20.7	21.2	12.1

A further table gives a more detailed list of the findings, and the incidence per 1,000 inspections.

	Incidence per 1,000 inspections	
	1949	1950
Skin Diseases.....	17.2	22.2
Defects of Vision (Entrant Group not counted)	35.1	26.6
Squint	4.9	1.2
Other Eye Diseases	5.5	7.7
Defects of Hearing	4.8	2.3
Otitis Media	3.1	1.5

	Incidence per 1,000 inspections	
	1949	1950
Chronic Tonsillitis	22.4	14.6
Adenoids.....	2.1	3.4
Adenoids and Chronic Tonsillitis	4.1	13.1
Other Nose and Throat Defects	16.2	11.57
Defects of Speech	4.5	1.9
Organic Heart Disease	2.7	3.0
Orthopaedic :—		
Posture	59.6	21.2
Flat foot	27.9	12.7
Other forms	15.5	13.9
Developmental :—		
Hernia	3.8	1.1
Others	3.4	0.7
Psychological :—		
Development	2.1	0.7
Stability	1.0	—

Ascertainment of Children requiring Special Educational Treatment

In the 1944 Education Act, it is particularly emphasised that Authorities should aim at making provision for these children who, by reason of physical or mental handicap, cannot benefit from education in an ordinary school.

Below are given the several categories of defect which require special educational treatment, and the number of children in Southport for whom provision must be made.

Category	Ascertained in 1950	Previously known to Department	In Special School
Blind	1	1	2
Partially sighted	—	—	—
Deaf	1	8	9
Partially Deaf	—	8	7
Delicate	1	18	1
Diabetic	—	—	—
Educationally sub-normal :— (Recommended Special School)	5	32	2
Educationally sub-normal :-— (Recommended Special Teaching in Special Class at Ordinary School)	7	96	—
Epileptic	—	6	2
Maladjusted	3	13	3
Physically handicapped.....	10	67	7
Defective Speech	16	33	—

As will be seen the greatest need is for some provision for the educationally sub-normal child, as it is almost impossible to obtain a vacancy in a residential school.

Arrangements for Treatment

All the clinics are held at the Central Clinic at 2 Church Street, and the weekly time-table is as follows :—

DAY	TIME	CLINIC	
Monday	9-30 am.. to 12 noon.	Dressings Clinic	2 Nurses
	2-0 p.m. to 4 p.m.	Doctors' Minor Ailment Clinic ...	{ 2 Doctors 3 Nurses
Tuesday	9-30 a.m. to 12 noon	Dressings Clinic	1 Nurse
	9-30 a.m.	Sunlight Clinic (Boys)	{ 1 Nurse
	10-45 a.m.	„ „ (Girls)	{ 1 Doctor
	9 a.m.	*Eye Clinic	{ 1 Nurse
Wednesday ...	2 p.m. to 4 p.m.	Sunlight Clinic (Babies)	{ 1 Nurse
	2 p.m. to 4 p.m.	Dressings Clinic	{ 1 Doctor
	2 p.m.	*Eye Clinic	{ 1 Nurse
Thursday	9-30 a.m. to 12 noon	Dressings Clinic	1 Nurse
	9-30 a.m.	Sunlight Clinic (Boys)	{ 1 Nurse
	10-45 a.m.	„ „ (Girls)	{
	2 p.m. to 4 p.m.	Skin Clinic	{ 1 Doctor 3 Nurses
Friday	9-30 a.m. to 12 noon	Dressings Clinic	1 Nurse
	9-30 a.m.	*Ear, Nose and Throat Clinic	{ 1 Doctor
			{ 1 Nurse
	2 p.m. to 4 p.m.	Dressings Clinic	1 Nurse
Saturday		Immunisation.....	{ 1 Doctor
			{ 1 Nurse
		Sunlight (Babies)	1 Nurse
Saturday	9 a.m. to 12 noon	Dressings Clinic	1 Nurse
	9 a.m.	Sunlight Clinic (Boys)	{ 1 Nurse
	10-30 a.m.	„ „ (Girls)	{

* By appointment only.

Dental Clinics are held daily by two dentists.

A summary of the attendances at these clinics shows the large amount of work, which, year by year, passes through the hands of the medical, dental and nursing staff.

CLINIC	Attendances	
	1949	1950
Nurses Treatment Clinic	8891	8532
Minor Ailment Clinic	2997	2717
Skin Clinic	910	1216
Tonsils and Adenoids Clinic	300	227
Tonsils and Adenoids (Southport Infirmary)	198	88
Ophthalmic Clinic	1154	1129
Artificial Sunlight Clinic	2735	2399
Aural Clinic	1441	1282
Dental Clinic	6945	5947
Immunisation Clinic (complete course— 84 in 1950, 182 in 1949).....	594	264
Immunisation Clinic (re-inforcing dose)	970	244
TOTAL NUMBER OF ATTENDANCES	27133	24045

Nurses' Treatment Clinic.—The scheme inaugurated in 1945 is still followed. Children who are absent from school, and children from junior schools attend for treatment in the morning, while those from senior schools come in the afternoon—grammar school and high school students coming after school hours. This scheme works well with the co-operation of the school authorities, and excessive loss of school time is avoided, and the time spent in the clinic by parents accompanying children is reduced to a minimum.

Minor Ailment Clinic.—This clinic continues to be well attended, and in the winter months tends to be too busy.

In addition to minor ailments, cases may be seen here before being directed to attend hospitals, etc. for more specialised treatment. Some cases, which are seen at Routine Inspection, must also be followed up for some months, and these cases are supervised at the Minor Ailment Clinic, along with other classes of handicapped children.

In 1950, 2,717 children attended the clinic; 97 cases were referred to the Southport Infirmary for a specialist opinion, 6 to the Royal Liverpool Children's Hospital and 2 to the Royal Southern Hospital.

Skin Clinic.—One specialist clinic is held each week with a dermatologist in attendance. It is a busy clinic, and a great variety of skin diseases are treated, many in the early stages. During the year 1,216 attendances were made at the clinic; one child was admitted to the Skin Department at the Southport Infirmary from the clinic. 8 children were notified as suffering from scabies this year as compared with 13 last year.

Eye Clinic.—This is a very valuable clinic, as a specialist opinion of an eye defect can be obtained as soon as one is detected. 78 specialist clinics were held during the year; 249 new cases were inspected and 448 cases were seen for supervision and revision of their spectacles. 53 cases were given further treatment at the Southport Infirmary.

Ear, Nose and Throat Clinic.—One specialist clinic is held weekly and the clinic is a busy one. Cases are referred to this clinic from the Minor Ailment Clinic, the Routine Medical Inspections at school and sometimes by general practitioners.

Any operative treatment or further hospital treatment is carried out at Southport Infirmary. Other cases are given treatment at the Nurses' Treatment Clinics.

In 1950 333 children attended for the first time, 88 attended for observation of progress from previous years and 32 children under five years of age were also seen. In 88 cases, operations were performed for diseased tonsils and/or adenoids. Other cases included acute and sub-acute inflammation of the mastoid air cells, otitis media, sinus infections, defective hearing, etc., and other defects.

Artificial Sunlight Clinic.—Clinics are held in the mornings for school children, and in the afternoons for children under five years of age. A wide variety of complaints are treated at this clinic ; these include tuberculous glands, bronchitis, general debility, rachitic conditions, catarrhal defects and certain skin complaints.

96 school children made a total of 1,555 attendances ; 33 children under school age were also treated—total attendances at the clinic were 2,399.

Treatment of Other Conditions

Orthopaedic Conditions.—A physiotherapist was on the staff until the end of July, 1950. During this time she supervised the artificial sunlight clinics for school children and also held Remedial Exercise Clinics for children found to be suffering from a variety of orthopaedic conditions. The clinic was held at Hampton Road Welfare Centre and 207 children attended for exercises.

In addition, 44 cases were sent to the Southport Infirmary and the Promenade Hospital for specialist opinion and treatment.

Tuberculosis.—8 new cases of tuberculosis in school children were notified during 1950.

Cases were as follows :—

Pulmonary	1
Cervical Glands.....	4
Abdominal Glands	1
Shoulder.....	1
T.B. Meningitis	1

School children suspected to be suffering from tuberculosis are sent to the various clinics at Southport Infirmary for examination and treatment.

Delicate Children.—There are 19 children suffering from asthma, bronchitis, rheumatism, etc., who do not respond well to ordinary school life. It is almost impossible to find accommodation in Residential Special Schools and meantime much school time is lost with retardation in school work for the children.

Infectious Diseases.—Notifications were as follows with figures for 1949 for comparison :—

	1949	1950
Measles	360	257
Rubella	23	16
Scarlet Fever	83	123
Chicken Pox	346	151
Diphtheria	—	—
Whooping Cough	82	167
Tuberculosis	5	8

The minimum periods of exclusion from school of persons suffering from infectious diseases and of persons who have been in contact with such cases are as follow :—

DISEASE	Period of Exclusion of Children Suffering from Infectious Disease	Period of Exclusion of Children living in a house in which there is or has recently been Infectious Disease
*SCARLET FEVER	5 weeks	(1) Children living in a house in which there is, or has recently been, a case of Scarlet Fever must be excluded from School for 7 days after the removal of the patient to the Isolation Hospital and for a further 7 days after the return of the patient from the Hospital, or (2) If the patient is nursed at home, until 7 days after the disinfection of the premises.
*DIPHTHERIA	4 weeks	(1) Children living in a house in which there is, or has recently been, a case of Diphtheria must be excluded for 7 days after the removal of the patient to the Isolation Hospital, or (2) While the patient is being nursed at home. Contacts of Diphtheria carriers go to school.
MEASLES.....	2 weeks from the date of appearance of the rash	Children under 7 living in a house in which there is a case of Measles must stay away from school, whether they have had the disease or not, for 2 weeks from the appearance of rash in the last case. Children over 7, if they have had the disease, may go to school, but if not they must stay at home for 2 weeks from the commencement of the last case.
WHOOPING COUGH	5 weeks.	Children under 7 years of age, for 3 weeks from the commencement of the last case.
RUBELLA (German Measles)	10 days.	Children not themselves suffering must attend school.
CHICKEN POX	3 weeks and till all scabs have disappeared.	Children not themselves suffering must attend school.
MUMPS	3 weeks.	

NOTE.—The above periods of exclusion apply also to teachers, caretakers or other persons attending the school.

*No child is to be re-admitted after suffering from **Scarlet Fever** or **Diphtheria**, or after having been a carrier of Diphtheria till he or she has been passed by the **School Medical Officer**.

Ringworm or Scabies.—No child is to be re-admitted after suffering from either of these diseases **without a Doctor's Certificate**.

Miscellaneous School Medical Work

Examination of Boarded-out Children	25
„ „ for Scholarships	102
„ „ „ Institutions	19
„ „ „ Children's Sanatorium	3
„ Free Meals and/or Milk	4
Entertainments	25
Admission to Residential Nursery	27
Admission to Children's Home, Eversley House	24
Admission to Training Ship	—
Form completed for Adoption	—
Children notified to the local Mental Deficiency Authority	9
Employment Examinations	165

Home Visits by School Nurses

Follow up—R.M.I.	23
On account of illness	234
To Infectious Cases	24
To Infectious Contacts	82
Re-Immunisations	209

STATISTICAL TABLES

TABLE I

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PRIMARY, SECONDARY AND GRAMMAR SCHOOLS

Year ended 31st December, 1950

A.—Routine Medical Inspections

Number of Inspections in the prescribed Groups :—	
Entrants	990
Primary Leavers	942
Secondary and Grammar Leavers	661
Total	2,593
<hr/>	
Number of other Routine Inspections	—

B.—Other Inspections

Number of Special Inspections	1853
Number of Re-Inspections	4175
	<hr/>
	6028
	<hr/>

TABLE I (continued)

C.—Children found to Require Treatment

Number of Individual Children found at Routine Medical Inspection to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

	For defective Vision (excluding squint)	For all other conditions recorded in Table IIa	Total
Prescribed Groups :—			
Entrants	9	196	205
Primary Leavers	60	140	200
Secondary and Grammar Leavers	26	54	80
Total (Prescribed Groups)	95	390	485
Other Routine Inspections	—	—	—
Totals	95	390	485

TABLE II

A.—Return of Defects found by Medical Inspection in the year ended 31st December, 1950

DEFECT OR DISEASE	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring Treatment	Requiring to be kept under observation but not requiring treatment	Requiring Treatment	Requiring to be kept under observation but not requiring treatment
(1)	(2)	(3)	(4)	(5)
SKIN :—				
Ringworm : Scalp	—	—	1	—
do. Body	—	—	2	—
Scabies	—	—	5	1
Impetigo	—	—	12	—
Other Diseases (non-T.B.)	33	25	429	16
EYE :—				
Blepharitis	10	5	17	1
Conjunctivitis.....	—	—	12	1
Keratitis	—	—	—	—
Corneal Opacities	—	—	—	—
Other Conditions (Excluding Defective Vision and Squint).....	10	4	32	3
Defective Vision (excluding Squint)...	75	5	32	1
Squint	10	8	8	2
EAR :—				
Defective Hearing	6	3	8	1
Otitis Media	4	4	7	5
Other Ear Diseases	4	8	49	3
NOSE AND THROAT :—				
Chronic Tonsillitis only	38	109	57	22
Adenoids only	9	4	3	1
Chronic Tonsillitis and Adenoids	35	18	13	—
Other conditions	30	34	104	18

(continued overleaf)

TABLE II (continued)

DEFECT OR DISEASE	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring Treatment	Requiring to be kept under observation but not requiring treatment	Requiring Treatment	Requiring to be kept under observation but not requiring treatment
(1)	(2)	(3)	(4)	(5)
Enlarged Cervical Glands (Non-T.B.) ...	5	24	15	10
Defective Speech	5	3	5	2
HEART AND CIRCULATION :—				
HEART DISEASE :—				
Organic	8	8	1	2
Functional	—	1	1	—
Anaemia	5	7	4	—
LUNGS :—				
Bronchitis	7	15	21	2
Other Non-Tuberculous Diseases	17	7	14	—
TUBERCULOSIS :—				
Pulmonary :—Definite	—	—	—	—
Suspected	—	—	—	—
Non-Pulmonary :—Glands	—	—	2	—
Bones and Joints ...	—	—	—	—
Skin	—	—	—	—
Other Forms	—	—	—	—
NERVOUS SYSTEM :—				
Epilepsy	—	—	—	—
Chorea	—	—	3	—
Other Conditions	2	5	4	—
ORTHOPAEDIC :—				
Posture	54	39	91	87
Flat Foot	33	42	69	51
Other Forms	36	48	84	67
DEVELOPMENTAL :—				
Hernia	2	5	—	—
Other	2	2	1	—
PSYCHOLOGICAL :—				
Development	5	—	12	2
Stability	—	—	11	—
Other Diseases and Defects (excluding Uncleanliness and Dental Diseases)...	40	58	511	174
TOTALS	485	491	1640	472

B.—Classification of the General Condition of Pupils Inspected during the Year in the Routine Age Groups

AGE GROUPS	Number of Pupils Inspected	A Good		B Fair		C Poor	
		No.	%	No.	%	No.	%
Entrants	990	303	30.61	656	66.27	30	3.03
Primary Leavers	942	272	28.87	653	69.31	16	1.69
Secondary and Grammar Leavers ...	661	150	22.70	511	77.31	2	0.30
Other Routine Inspections	—	—	—	—	—	—	—
TOTALS	2593	725	27.96	1820	70.20	48	1.85

TABLE III

INFESTATION WITH VERMIN

(i)	Total number of examinations in the schools by the School Nurses	19556
(ii)	Total number of individual pupils found to be infested.....	138
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	21
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—
(v)	Number of cases in which legal proceedings were taken under the Education Act, 1944	—

TABLE IV

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING SPECIAL SCHOOLS)

NOTES—

- (a) Treatment provided by the Authority includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, *i.e.* whether by periodic inspection, special inspection, or otherwise, during the year in question or previously.
- (b) Treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

Group I.—Diseases of the Skin (excluding uncleanness, for which see Table III)

	Number of cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm—(i) Scalp	1	—
(ii) Body	1	—
Scabies	8	—
Impetigo.....	12	—
Other Skin Disease	496	—
	518	—

TABLE IV (*continued*)*Group 2.—Eye Diseases, Defective Vision and Squint*

	Number of Cases dealt with	
	By the Authority	Otherwise
External and other, excluding Errors of Refraction and Squint	164	—
Errors of Refraction (including Squint).....	638*	—
TOTAL	802	—
Number of Pupils for whom Spectacles were—		
(a) Prescribed	217*	—
(b) Obtained	176*	—
TOTAL	393	—

*Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

Group 3.—Diseases and Defects of Ear, Nose and Throat

	Number of Cases treated	
	By the Authority	Otherwise
Received Operative Treatment :—		
(a) For Diseases of the Ear	21	—
(b) For Adenoids and Chronic Tonsillitis	88	—
(c) For other Nose and Throat Conditions	3	—
Received other forms of treatment	8	—
TOTAL	118	—

Group 4.—Orthopaedic and Postural Defects

(a) Number treated as in-patients in hospitals	1	

TABLE IV (continued)

Group 5.—Child Guidance Treatment

	Number of Cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of Pupils treated at Child Guidance Clinics	—	15

Group 6.—Speech Therapy

	Number of Cases Treated	
	By the Authority	Otherwise
Number of Pupils treated by Speech Therapists.....	—	—

Group 7.—Other Treatment given

	Number of Cases treated	
	By the Authority	Otherwise
Miscellaneous Minor Ailments	1182	—

TABLE V

DENTAL INSPECTION AND TREATMENT

1. Number of pupils inspected by the Authority's Dental Officers :—

(a) Routine Age Groups—

Aged 3	61	Aged—12	676
4	134	13	701
5	386	14	587
6	412	15	239
7	378	16	161
8	372	17	65
9	386	18	41
10	397	19	8
11	642	TOTAL	5646

(b) Specials 1070

(c) Total (Routine and Specials) 6716

TABLE V (*continued*)

2.	Found to require treatment	4251
3.	Number referred for treatment	4015
4.	Number actually treated	2925
5.	Attendances made by pupils for treatment	5149
6.	Half-days devoted to—Inspection	50
	Treatment	727
	Total (6)	777
7.	Fillings—Permanent Teeth	979
	Temporary Teeth	1696
	Total (7)	2675
8.	Number of teeth filled—	
	Permanent Teeth	1552
	Temporary Teeth	938
	Total (8)	2490
9.	Extractions—	
	Permanent Teeth	622
	Temporary Teeth	3565
	Total (9)	4187
10.	Administration of general anaesthetics for extraction	—
11.	Other Operations—	
	Permanent Teeth	538
	Temporary Teeth	552
	Total (11)	1090

TABLE VI

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31ST DECEMBER, 1949 BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY, UNDER SECTION 57, SUB-SECTIONS (3) AND (5) OF THE EDUCATION ACT, 1944.

Total number of children notified :—

Section 57, Sub-section (3)	6
Section 57, Sub-section (5)	3

Section 57 of the Education Act, 1944, is as follows :—

SUB-SECTION (3).—If, after considering the advice given with respect to any child by a medical officer in consequence of any such medical examination as aforesaid and any reports or information which the local education authority are able to obtain from teachers or other persons with respect to the ability and aptitude of the child, the authority decide that the child is suffering from a disability of mind of such a nature or to such an extent as to make him incapable of receiving education at school, it shall be the duty of the authority to issue to the local authority for the purposes of the Mental Deficiency Act, 1913, a report that the child has been found incapable of receiving education at school. Provided that, before issuing such a report with respect to any child, the local education authority shall give to the parent of the child not less than 14 days' notice in writing of their intention to do so, and

if within that period the parent refers to the Minister the question whether such a report should be issued, the report shall not be issued except by direction of the Minister.

SUB-SECTION (5).—If the local education authority are satisfied that any child in attendance at a school maintained by them or at any special school not so maintained is suffering from a disability of mind of such a nature or to such an extent that he will, in their opinion, require supervision after leaving school, the authority shall before the child ceases to be of compulsory school age issue to the local authority for the purposes of the Mental Deficiency Act, 1913, and to the parent of the child, a report that by reason of a disability of mind the child may require supervision after leaving school.

TABLE VII
PRIMARY, SECONDARY AND GRAMMAR SCHOOLS
FINDINGS AT ROUTINE MEDICAL INSPECTION

	Entrants		Primary Leavers		Secondary & Grammar Leavers		Total	
	No.	%	No.	%	No.	%	No.	%
Listed for Inspection	—	—	—	—	—	—	2780	—
Absent from Inspection	—	—	—	—	—	—	187	—
Parent refused Inspection	—	—	—	—	—	—	—	—
Actually Inspected	990	—	942	—	661	—	2593	—
Parent or Guardian present	608	61.4	249	26.4	11	1.6	868	33.4
Unvaccinated	541	54.7	685	72.7	481	72.7	1707	65.8
Unsatisfactory clothing	—	—	1	0.1	—	—	1	0.0
„ footwear	—	—	—	—	—	—	—	—
Malnutrition	30	3.0	16	1.6	2	0.3	48	1.8
Nits in the Hair	7	0.7	22	2.3	19	2.8	48	1.8
Verminous Hair	1	0.1	3	0.3	1	0.1	5	0.2
„ Clothing	3	0.3	1	0.1	—	—	4	0.2
Bodies Dirty	—	—	—	—	—	—	—	—
Defective Teeth	91	9.8	69	7.3	37	5.5	197	7.5
NOSE AND THROAT :—								
Enlarged Tonsils and Adenoids ...	75	7.5	48	5.0	24	3.6	147	5.6
Other Conditions	34	3.4	22	2.3	8	1.2	64	2.4
Glands in the Neck	19	1.9	10	1.1	—	—	29	1.1
EYE :—								
External Eye Disease	6	0.6	20	2.1	3	0.4	29	1.1
Defective Vision	7	0.7	49	5.2	24	3.6	80	3.0
Squint	12	1.2	3	0.3	3	0.4	18	0.6
EAR :—								
Defective Hearing	2	0.2	2	0.2	5	0.7	9	0.3
Ear Disease	13	1.3	5	0.5	2	0.3	20	0.7
Speech Defects	4	0.4	4	0.4	—	—	8	0.3
HEART AND CIRCULATION :—								
Cardiac Disease	6	0.6	6	0.6	5	0.7	17	0.6
Anaemia	5	0.5	6	0.6	1	0.1	12	0.4
Lung Disease	30	3.0	8	0.8	8	1.2	46	1.7
Nervous Disease	4	0.4	2	0.2	1	0.1	7	0.3
Tuberculosis	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—
DEFORMITIES :—								
Posture, Flat Feet, etc.	74	7.4	110	11.6	68	10.1	252	9.7
Skin Disease	22	2.2	14	1.5	22	3.3	58	2.2
DEVELOPMENT :—								
(a) Hernia	6	0.6	1	0.1	—	—	17	0.3
(b) Others	3	0.3	1	0.1	—	—	4	0.2
PSYCHOLOGICAL :—								
(a) Development	2	0.2	3	0.3	—	—	5	0.2
(b) Stability	—	—	—	—	—	—	—	—
Other Disease or Defect	36	3.6	38	4.0	14	2.1	88	3.3

TABLE VIII

PRIMARY, SECONDARY AND GRAMMAR SCHOOLS

AVERAGE HEIGHTS AND WEIGHTS (Age last Birthday)

BOYS					1938					GIRLS				
No. Inspected	Age last birthday	Ft.	In.	St. Lbs.	No. Inspected	Age last birthday	Ft.	In.	St. Lbs.	No. Inspected	Age last birthday	Ft.	In.	St. Lbs.
32	3	3—	1.7	2— 7.8	33	3	2—	10.3	2— 6.9					
88	4	3—	4.6	2—11.3	80	4	3—	4.0	2— 9.1					
171	5	3—	6.6	3— 0.4	175	5	3—	6.3	2—13.2					
64	6	3—	8.7	3— 3.8	60	6	3—	8.9	3— 4.1					
28	7	3—	10.5	3— 9.9	37	7	3—	10.9	3— 7.4					
281	8	4—	1.4	4— 0.0	291	8	4—	1.6	3—13.2					
59	9	4—	3.3	4— 4.5	54	9	4—	3.9	4— 7.8					
40	10	4—	5.3	4—10.0	42	10	4—	7.1	5— 0.5					
83	11	4—	6.8	5— 6.6	55	11	4—	9.0	5— 7.7					
362	12	4—	8.6	5—10.7	324	12	4—	10.5	5—10.7					
148	13	4—	11.4	6— 6.3	110	13	5—	1.3	7— 0.6					
107	14	5—	2.3	7— 6.2	79	14	5—	4.5	7—12.1					
91	15	5—	5.7	8— 7.2	107	15	5—	3.4	8— 1.6					
43	16	5—	6.3	8— 8.7	25	16	5—	3.6	8— 5.7					
23	17	5—	7.7	9— 6.6	15	17	5—	5.5	8— 4.9					
11	18	5—	7.6	9— 5.9	2	18	5—	3.8	8— 6.6					
<u>1,631</u>					<u>1,489</u>									
BOYS					1950					GIRLS				
No. Inspected	Age last birthday	Ft.	In.	St. Lbs.	No. Inspected	Age last birthday	Ft.	In.	St. Lbs.	No. Inspected	Age last birthday	Ft.	In.	St. Lbs.
50	3	3—	2.3	2—10.1	58	3	3—	2.3	2— 7.2					
147	4	3—	4.7	2—12.5	113	4	3—	4.8	2— 9.6					
189	5	3—	7.2	3— 1.3	139	5	3—	6.0	3— 0.1					
57	6	3—	9.1	3— 4.1	56	6	3—	9.2	3— 3.9					
15	7	3—	11.4	3—11.0	25	7	3—	10.0	3—10.1					
27	8	4—	2.5	4— 5.5	32	8	4—	2.6	4— 1.9					
15	9	4—	4.9	5—11.5	16	9	4—	3.6	4— 8.3					
205	10	4—	5 8	5— 1.6	184	10	4—	6.1	4— 0.1					
572	11	4—	7.1	5— 8.8	252	11	4—	7.4	5— 6.7					
29	12	4—	10.3	5— 7.6	39	12	4—	9.6	6—11.0					
26	13	5—	0.5	6—10.3	63	13	5—	2.5	6— 0.6					
72	14	5—	2.5	7— 7.3	101	14	5—	1.7	7— 7.1					
86	15	5—	4.0	8— 1.7	40	15	5—	2.8	8— 0.6					
47	16	5—	6.1	9— 7.9	22	16	5—	3.5	8—11.7					
34	17	5—	8.5	9—12.2	20	17	5—	5.3	9— 9.5					
24	18	5—	9.4	10— 2.0	7	18	5—	3.5	9— 5.1					
4	19	5—	5.8	9— 8.6										
<u>1,599</u>					<u>1,167</u>									

SCHOOL DENTAL SERVICE

Report for the year 1950

	Primary Schools	Secondary and Grammar Schools	Total
Number of Schools visited	13	9	22
Number of Children examined	2677	2969	5646
Children needing treatment.....	1805	1586	3391
Appointments	4271	1951	6222
Special Inspections—			
Number inspected	800	270	1070
Number found to require treat- ment	674	186	860
Extractions—			
Temporary	2464	211	2675
Permanent	143	194	337
Local Anaesthetic	2680	604	3284
Fillings—			
Temporary	968	11	979
Permanent	694	1002	1696
Dressings	546	85	631
Scalings	66	68	134
Root Treatment	18	65	83
Teeth Extracted for Regulation Purposes—			
Temporary	801	89	890
Permanent	86	199	285
Oral Affections	87	62	149
Other Operations	68	104	272
Consultation with Parent	134	24	158
Examined, treatment deferred.....	531	320	851
Number of Treatments—			
Routine New.....	1375	536	1911
Re-Visits	514	326	840
Specials New.....	765	249	1014
Re-Visits	950	434	1384

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